

California Department of Corrections and Rehabilitation

Office of Audits and Compliance



Operational Peer Review

Valley State Prison for Women

January 5 through January 16, 2009

TABLE OF CONTENTS

SECTION

Administrative Segregation and Due Process.....	1
Business Services.....	2
Information Security	3
Education Programs	4
Inmate Appeals	5
Administrative Segregation Bed Utilization	6
████████████████████	7
Case Records	8
████████████████████	9
████████████████████	10
Risk Management Programs.....	11

OFFICE OF AUDITS AND COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

EXECUTIVE SUMMARY

The Office of Audits and Compliance, in conjunction with various teams, conducted an audit of Administrative Segregation (Ad Seg) and Due Process, Business Services, Information Security, Inmate Education Programs, Inmate Appeals, Ad Seg Bed Utilization, [REDACTED], Case Records, [REDACTED], [REDACTED], and Risk Management at Valley State Prison for Women (VSPW). The audit was performed during the period of January 5 through January 16, 2009. The purpose of the audit was to determine VSPW's compliance with State, federal, and departmental rules, regulations, policies, and procedures.

Preliminary audit reports were prepared for each of the audited areas. This executive summary identifies the significant issues identified in each of the preliminary reports. For more information on the areas of interest, please see the detail preliminary report. The Office of Audits and Compliance requested that VSPW provide a corrective action plan 30-days from the date of the preliminary report.

A summary of the significant issues is as follows:

Ad Seg and Due Process

Areas of concern were found in the following areas:

- **Administrative Review.** Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1-2 days late) and 1 record documented a late counter signature by an Associate Warden when the review was conducted by an acting Captain (7 days late).
- **Inmate Waiver.** Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 13 remaining records, 12 documented the inmate had waived the 72-hour preparation time absent the inmate's signature and 1 record left this section blank.
- **Witnesses Addressed on the Classification Chrono (CDC 128-G).** Of the 30 records reviewed, 29 were not ratable as the need for witnesses was properly documented on the Inmate Segregation Unit Placement Notice (CDC 114-D) or the CDC 128-G had not yet been typed. The one ratable record did not address witnesses on the CDC 128-G when this information was not otherwise properly documented on the Administrative Segregation Unit Placement Notice, CDC-114-D.

Business Services

Personnel

Position Control:

VSPW has more positions than authorized by the Governors Budget and the Department of Finance. As of January 13, 2009, there are 26 Correctional Officers (CO) paid out of the 918 blanket. This issue results in over expending the budget authority by approximately \$354,249.

The Periodic Position Control Report, dated January 1, 2009, notes 71 positions that are over expending VSPW's budget authorization. This condition results in over expending the budget authority.

The State Controller's Periodic Position Control Report is not reconciled on a monthly basis. This condition results in the late detection of errors and irregularities, loss of positions, over-expenditure of the budget authority and additional workload.

The Personnel Office did not establish Accounts Receivable (AR) for Custody Staff who did not submit Employee Attendance Record (CDC 998-A) forms, for approximately two years. Additionally, 48 percent of Correctional Counselors I, and 13 percent of Custody Staff have not submitted their CDC 998-As to the Personnel Office for the October 2008 pay period.

Payroll:

Payroll documents are not certified (e.g., signed, and dated) by Personnel Staff. The following documents require certification: Absences without Pay Report (Std. 603); Time and Attendance Report (Form 672); and Miscellaneous Payroll/Leave Actions (Std. 671). In addition, a pencil and white out was used on the payroll documents. This issue could result in manipulation of time paid and late detection of errors or irregularities.

Classification and Pay:

Hiring interview packages do not show a clear scoring process, the interviewer's signature is missing; designated competitive criteria and overall ratings are also missing. Additionally, an interview package for a correctional sergeant was missing the completed interview package. These conditions result in difficulty justifying the selection, in the event a complaint is filed and a hearing scheduled with the State Personnel Board.

During the review of the Personnel Action/Request for Admission (CDC 647) process, it was noted that procedures are not followed when processing transactions that involve positions. For example, the CDC 647s are not submitted when moving staff from one position to another. This condition may result in improper appointment documentation, possible circumvention of the process; late detection of errors, irregularities, and/or misappropriation.

Twenty CDC 647 packages were reviewed for completeness and the following deficiencies were found: four appointments were made to classifications without getting approval from the Office of Personnel Services, (Request for Certification (Std. 625) were not forwarded to headquarters as required), limited-term appointments were not justified on the CDC 647 (or in the package), one employee was not tested for TB, and position numbers were missing on organizational charts, etc. This condition could result in possible circumvention; excessive budget expenditures, approval of misallocated positions, and an employee could have been infected with TB and allowed into the facility.

Twenty out-of-class assignments were randomly selected for review. The following deficiencies were noted: extensions were not sent to headquarters for approval, as required; also, recruitment efforts are not documented for original or extensions to show the attempt to fill vacancies through the appropriate process. This condition could result in the revoking of the out-of-class delegation by Department of Personnel Administration.

Environmental Health and Safety

There are deficiencies related to the Hazardous Waste and Management Program. Of the 13 locations reviewed, the following 9 areas were deficient: electrician, paint, small engine shops, garage, hazardous waste storage, medical, water treatment, warehouse, and central kitchen. For example, waste containers do not have a universal waste label, documents and receipts for hazardous waste pick-ups are not retained, incompatible chemicals are stacked on top of each other, and hazardous waste is located in a flammable cabinet and does not have an accumulation start date, etc. These conditions may result in difficulty responding to emergencies and late detection of missing chemicals.

Food Services

Food Carts used to transport food from the Satellite Kitchen to the Administrative Segregation Unit (ASU) are not sufficient to retain food at safe temperatures for extended times. This issue could result in the development of food borne illnesses, unnecessary administrative labor cost, and inmate appeals/lawsuits.

Food is not dated when received from the warehouse. This issue makes it difficult to use the first-in, first-out method of inventory control.

Serving trays are not properly stacked to facilitate adequate drying. This was noted in all facilities inspected. Trays are double stacked and wet trays are towel dried. Health and Safety Code.

This condition results in the development of bacteria, odors, and unnecessary administrative labor cost for handling inmate appeals.

Inmate Trust Accounting

There are approximately 1,000 obsolete checks that were not destroyed. This condition may result in late detection of missing State funds.

Plant Operations

There are deficiencies related to the cross-connection program (i.e., backflow devices). For example, the master list does not reconcile to the Standard Automated Preventive Maintenance System database, and it is difficult to determine the number of backflows located throughout the Institution.

Penalties and Fines

Lump sum payments for separations were not issued within 72 hours. Of the 12 lump sum payments reviewed, 5 were not issued within 72 hours. This condition could result in severe penalties and prosecution. Also, the Institution could be held liable for treble damages.

Information Security

Staff Computing Environment:

- Annual Self-Certification of Information Security Awareness and Confidentiality forms are not on file.
- Information security training is not current.
- Anti virus updates are not current.
- Security patches are not current.

Staff Computing Environment:

Anti virus updates are not current.

Inmate Education Programs

The following comments are the result of a follow-up review to VSPW's May 2008 Compliance Review.

VSPW has raised its score from 80 percent in May 2008 to a present overall score of 96 percent. However, 13 items remain in noncompliance.

Inmate Appeals

Access to Inmate Appeals:

The Orientation Handbook is provided for the inmates in the reception building at the time of arrival; however, it does not mention the appeals process. The Institution is in the process of correcting this by adding the appeals portion to the Orientation Handbook.

Half points have been given to this question, because there is no established Orientation Presentation for Reception inmates regarding the appeals procedures are

verbally presented. However, staff are available to answer questions that inmates may have regarding the appeal process.

Preparation of Appeals:

The low score in this section is mostly due to the completion dates varying between the date on the Inmate/Parolee Appeal (CDC 602) and the Inmate Appeals Tracking System. There were also many instances where the date completed on the CDC 602 by the receiver, and the date completed Inmate Appeals Tracking System did not agree.

Most appeals were missing the “Completed Dates” on the First and Second Level Review. A few of the appeals that were reviewed did not include the “Received” and “Completed” dates at the Informal level. This issue was discussed with the Appeal’s Office, and appears to be a training issue for custody staff.

Timeframes:

The lower score in this section is due to some appeals not being assigned within the five day requirements. Specifically, the Staff Complaints reviewed are not being assigned until the hiring authority completes the Appeals Bulletin 05/03 regarding the administrative process, which delays the five day time constraints. It also appears that all other categories of appeals are sometimes processed in large numbers on certain days, but are still not being assigned within the five working days allowed. Also, staff are not completing the informal appeals in a timely fashion.

Ad Seg Bed Utilization

This review is presented in four separate case groups (i.e. General Case Processing Time, Disciplinary Process, Incident Report Processing, and Safety Concerns Investigation).

General Case Processing Time:

It is the expectation that cases referred for ASU retention be presented to the Classification Staff Representative (CSR) for review within 30 days of the Classification committee referral (California Code of Regulations, Section 3335(e)). Time from the initial Information Classification Committee (ICC) referral for CSR review to the actual CSR review ranged from 6 days to 90 days. Of the cases reviewed, 46 percent did not meet the expectation.

There was one case noted that had been in ASU over 30 days without an ASU extension approval. This inmate was placed into ASU on 11/6/08 due to Participation in a Riot. Initial ICC occurred on November 12, 2008; however, the case was never presented to the CSR. ICC of January 14, 2009 acted to assess, impose and suspend a Security Housing Unit term; and release the inmate to the general population. (The expectation is there should be 0 cases in this category).

Disciplinary Process:

- 1.) Hearing to Facility Captain Review: Time from the date of the Rules Violation Report (RVR) hearing to the date the RVR was audited by the Facility Captain ranged from “0” days to 34 days. The expectation is within 5 working days. Of the cases reviewed, 78 percent met this expectation.
- 2.) Facility Captain to Chief Disciplinary (CDO) Officer Review: Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the CDO ranged from “0” (as in same day as Captain’s review) days to 38 days. The expectation is within 3 working days. Of the cases reviewed, 54 percent met this expectation.
- 3.) CDO to ICC review: Time from the date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from “0” days (as in reviewed by ICC the same day of CDO signature) to 110 days. The expectation is within 14 days. Of the cases reviewed, 47 percent met this expectation.

Incident Reporting Processing:

The lack of District Attorney (DA) referral information in the files, combined with a lack of information in the DA Referral Logs, resulted in the inability of the auditors to conduct a full evaluation of the DA processing time-frame.

Regarding date of the incident occurrence to the date Investigative Services Unit (ISU) receives the Crime Incident Report (CDC 837):

According to the Deputy Director’s Memorandum dated March 26, 2003, the complete package will be presented to ISU within 21 calendar days. VSPW ranged from “0” days to 113 days. Of the 22 DA referral cases reviewed, only 1 percent was presented within the required days.

The following could not be evaluated:

Regarding date ISU receives the CDC 837 to DA screen-out or referral: According to the Deputy Director’s Memorandum dated March 26, 2003, the expectation is that the time should not exceed 5 working days.

Regarding DA Referral to Resolution: This is one area that the Institution has no definitive control over. However, it is suggested that the Institution work closely with the DA’s office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution.

Safety Concern Investigations:

- 1.) Investigation Initiation to Completion: Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from “0” days (as in completed same day of referral) to 90 days. The expectation is to be within the 30 calendar days. Of the cases reviewed, 50 percent met this expectation.
- 2.) Investigation Completion to ICC Review: Time from conclusion of the investigation to ICC review of investigation results ranged from “1” day (as in case seen by ICC the same date the investigation concluded) to 78 days. The ICC should review the

inmate's case within 14 days. Of the cases reviewed, 67 percent met this expectation.

[REDACTED]

[REDACTED]

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- [REDACTED] [REDACTED] [REDACTED]
- [REDACTED]
[REDACTED]

Case Records

Central Files:

VSPW did not:

- Utilize the Automated Release Date Tracking System (ARDTS) for tracking and requesting the Central Files.
- Implement a way to ensure Central Files of inmates that have paroled are being forwarded to the appropriate Region Records Office in accordance with policy and procedures.

Holds, Warrants, and Detainers (HWD): There were 21 Central Files reviewed for this portion of the Compliance Review. Listed below are the discrepancies found in the processing of the HWD.

VSPW did not:

- Review and update the HWD Desk Procedures for the clerical staff to include time frames for completing each step in the process.
- Update the procedures for the Correctional Case Records Analyst as necessary to include detailed instructions for processing HWD.
- Provide on the job training and for the Correctional Case Records Analyst in the HWD process.
- Query the OBIS HWD “KCHD” screen within 24 hours of release to work furlough, Temporary Community Leave or parole to verify there are no new holds for the inmate. This will help to prevent an erroneous release of an inmate with an active hold.
- Share Instructional Memorandums with all staff to ensure compliance with Departmental Policies.
- Provide training to appropriate staff to ensure the Detainer Summary, CDC 850 is being properly filled out to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.

Warden’s Checkout Order (CDC Form 161): There were 44 cases reviewed and the overall findings are as follows:

- The Early/Late Release Reports are not being submitted in a timely manner.
- The CDC Form 161 does not reflect the time of release pursuant to Department Operations Manual, Section 74070.21.

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
[REDACTED]
[REDACTED] [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]

Risk Management

Hazardous Materials:

VSPW does not have a certified Hazardous Waste Storage Facility and an Associate Hazardous Material Specialist (AHMS) to oversee an appropriate Hazardous Material program which includes approving receipt of hazardous materials into the Institution, overseeing satellite accumulation points, and providing proper training on the use and compatibility of hazardous materials, as well as other significant duties related to the management of hazardous materials. An AHMS is also required on-site to oversee the operations of a Hazardous Waste Storage Facility.

Risk/Impact-Failure to store hazardous waste appropriately will result in substantial fines levied against the Institution from agencies such as Department of Toxic Substance Control, County Environmental Health, and State and Federal Environmental Protection Agencies. There would be substantial clean up costs in addition to the fines.

The current *claimed storage area* is located on bare dirt and hazardous material containers do not have secondary containment which produces a high risk of contaminating the surrounding soil.

Items are also not inventoried as well as labels being out-of-date or unreadable. Due to this lack of identification of the materials stored, there is a risk of the containers leaking and therefore incompatible materials have the potential for creating toxic fumes or explosive gasses.

Unaccounted for used containers located in an unsecured area outside the *claimed storage facility* have the potential for being re-used to store incompatible products which could also produce toxic fumes or explosive gasses.

Worker's Compensation: VSPW should hire an additional Associate Government Program Analyst to serve as an Institution Workers' Compensation Analyst in order to better distribute workers' compensation caseload from the Return to Work caseload.

CAL/OSHA, Log 300 for inmates has not been posted for the last three years. The Institution risks being cited by Cal/OSHA for being out of compliance with Title 8.

Fire, Life, Safety, Systems – Equipment: Pump testing on fire engines is out-of-date. Equipment failure could result in loss of life or property during an emergency incident.

Sprinkler system inspections and testing are out-of-date in the Administration building. Gauges are also out-of-service. System failure during an emergency could cause extensive property damage and/or loss of life.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
AND
DUE PROCESS

VALLEY STATE PRISON FOR WOMEN

JANUARY 5 THROUGH JANUARY 16, 2009



PRELIMINARY

CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

TABLE OF CONTENTS

<u>SUBJECT</u>	<u>PAGE</u>
Introduction	I
Review Scope and Methodology	II
Compliance Rating by Subject Area	III
Executive Summary	IV
Summary Chart (Symbol Definitions)	V
Summary Chart	VI
Comparative Statistical Summary Chart	X
Narrative Section	
Summary of Facilities Reviewed	1
Conditions of Segregated Housing	1
Due Process	17
Administration	28
Glossary	34

Review of Administrative Segregation and Due Process

Valley State Prison for Women

INTRODUCTION

This review of administrative segregation (Ad Seg) operations and due process provisions at the Valley State Prison for Women (VSPW) was conducted by the Adult Compliance/Peer Review Branch, Office of Audits and Compliance (OAC), between the dates of January 5-9, 2009. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation's (CDCR) Department Operations Manual (DOM), CDCR's Use of Force Policy, Administrative Bulletins (AB) 95/3R and 99/03, and Information Bulletins (IB) as the primary sources of operational standards. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** were used in this review as a benchmark for litigation avoidance.

This review was conducted by Mike Brown, Correctional Counselor (CC) II; Al Sisneros, CC II; Chuck Lester, CC II, and Nancy Fitzpatrick, Associate Governmental Program Analyst of the OAC.

The review consisted of an on-site inspection, interviews with staff and inmates, reviews of procedures and other documentation, and observation of institutional operations.

The purpose of the OAC review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations and court-established standards.

Each area was reviewed by a minimum of two primary reviewers and cross verified by other members of the team as possible. Overall, findings presented in the attached report represent the consensus of the entire review team.

Review of Administrative Segregation and Due Process

Valley State Prison for Women

REVIEW SCOPE AND METHODOLOGY

The OAC conducted an on-site review at VSPW during the period of January 5-9, 2009. The purpose of this review was to assess the level of compliance with established State regulations and court-established standards in the areas of Ad Seg operations and due process provisions. This review and the attached findings represent the formal review of VSPW's compliance by OAC.

The scope and methodology of this review was based upon written review procedures developed by OAC and provided to VSPW's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process.

For the purposes of this review, facilities were toured by members of the review team, cell and tier inspections were conducted in the units, and randomly selected inmates were informally interviewed based upon their interest and willingness to talk to the reviewers.

Throughout the tour, on-duty staff at all levels (medical, counseling, management, administration, custody, and non-custody) were interviewed regarding current practices.

A random sample of 30 central files was reviewed. Utilizing "point-in-time" methodology, files were evaluated against all administrative requirements pertaining to the documents contained in those files.

Review of Administrative Segregation and Due Process

Valley State Prison for Women

COMPLIANCE RATING BY SUBJECT AREA

SECTION REVIEWED	NO. OF ITEMS REVIEWED	NO. OF ITEMS NOT RATABLE	NO. OF ITEMS IN COMPLIANCE	SECTION SCORE
Conditions of Segregated Housing	30	3	27	100%
Due Process	22	1	18	86%
Administration	10	0	10	100%

Review of Administrative Segregation and Due Process

Valley State Prison for Women

EXECUTIVE SUMMARY

During this formal review of compliance with State regulations and court-established standards regarding Ad Seg operations and due process provisions at VSPW, the Facility was found to be in compliance with 55 (95 percent) of the 58 ratable areas. Four areas were found to be not ratable during this review.

Areas of concern were found in the following areas:

- **Administrative Review.** Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1-2 days late) and 1 record documented a late counter signature by an Associate Warden when the review was conducted by an acting Captain (7 days late).
- **Inmate Waiver.** Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 13 remaining records, 12 documented the inmate had waived the 72-hour preparation time absent the inmate's signature and 1 record left this section blank.
- **Witnesses Addressed on the Classification Chrono (CDC 128-G).** Of the 30 records reviewed, 29 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. The 1 ratable record did not address witnesses on the CDC 128-G when this information was not otherwise properly documented on the CDC-114-D.

A complete description of these finding areas may be found in the narrative section of this report.

Review of Administrative Segregation and Due Process

Valley State Prison for Women

SUMMARY CHART (SYMBOL DEFINITIONS)

The following chart represents individual review findings in relation to the CCR, Title 15, DOM, PC, and ABs. In addition, applicable court-ordered minimum standards established under Toussaint v. Gomez are being used in this review as a benchmark for litigation avoidance.

Each of the items is rated as to whether or not the Institution is in compliance. The chart utilizes the following symbols to denote compliance ratings:

SYMBOL	DEFINITION
Compliance (C)	The requirement is being met.
Partial Compliance (P/C)	The institution is clearly attempting to meet the requirement, but significant discrepancies currently exist.
Noncompliance (N/C)	The institution is clearly not meeting the requirement.
Not Applicable (N/A)	Responsibility for compliance in this area is not within the authority of this institution.
Not Ratable (N/R)	No measurable instances.

At the end of the chart is a Comparative Statistical Summary Chart of Review Findings. This summary presents a mathematical breakdown of compliance by total items and percentages (%).

Review of Administrative Segregation and Due Process

Valley State Prison for Women

SUMMARY CHART

REVIEW STANDARD	REVIEW FINDING 7/07	REVIEW FINDING 1/09	PAGE NO.
I. CONDITIONS OF SEGREGATED HOUSING			
1. Living Conditions.	C	C	1
a. Housekeeping and Maintenance.	C	C	2
b. Vector Control.	C	C	2
2. Restrictions.	C	C	3
3. Clothing.	C	C	3
4. Meals.	C	C	4
5. Mail.	C	C	4
6. Visits.	C	C	5
7. Personal Cleanliness.			
a. Showering.	C	C	5
b. Haircuts.	C	C	6
c. Laundry Items.	C	C	6
8. Exercise.	C	C	6
9. Reading Material.	C	C	7
10. Rule Changes.	C	C	8

REVIEW STANDARD	REVIEW FINDING 7/07	REVIEW FINDING 1/09	PAGE NO.
11. Telephones.	C	C	8
12. Institution Programs and Services.	C	C	9
13. Visitation and Inspection.	C	C	9
a. Medical Attention.	C	C	10
14. Management Cells.			
a. Placement.	N/R	N/R	11
b. Reporting.	N/R	N/R	11
c. Transfer.	N/R	N/R	11
15. Access to the Courts.	C	C	12
16. Isolation Log Book (CDC 114).	C	C	12
17. Isolation/Segregation Record (CDC 114-A).			
a. All significant information documented.	C	C	13
b. The CDC 114-A1 notes yard group designation.	C	C	14
c. The CDC 114-A1 notes special information.	C	C	14
d. The CDC 114-A1 is updated every 90 days.	C	C	14
18. Safety.			
a. Fire Safety.	C	C	15
b. Quarterly Fire Drills.	C	C	16
c. Documentation.	C	C	16

REVIEW STANDARD	REVIEW FINDING 7/07	REVIEW FINDING 1/09	PAGE NO.
II. DUE PROCESS			
1. Authority.	C	C	17
2. Written Notice.	P/C	C	17
3. Receipt of CDC 114-D.	P/C	C	18
4. Confidential Material.	P/C	C	18
5. Review.	P/C	P/C	19
a. Staff Assistance.	P/C	C	20
b. Witnesses.	P/C	C	20
c. Inmate Waiver of Time Limitations.	P/C	P/C	20
d. Hearing Time Constraints.	C	C	21
e. Decision.	C	C	21
6. Hearing Within 10 Days.	C	C	22
a. Determinations documented on the CDC 128-G.	C	C	22
b. Hearing Date.	C	C	23
c. Inmate Presence.	C	C	23
d. Hearing Officer.	C	C	24
e. SA/IE on CDC 128-G.	C	N/R	24
f. Witnesses on CDC 128-G.	C	N/C	25
g. Yard Group on CDC 128-G.	C	C	25

REVIEW STANDARD	REVIEW FINDING 7/07	REVIEW FINDING 1/09	PAGE NO.
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h. Cell Status.	C	C	26
i. Participation.	C	C	26
7. Classification Review.	C	C	27
8. Classification Staff Representative (CSR) Review.	C	C	27

III. ADMINISTRATION			28
1. Training.	C	C	28
2. ICC.	C	C	29
3. Record of Disciplinary.	C	C	30
4. Post Orders-Firearms.	C	C	30
5. Post Order-Job-Site.	C	C	31
6. Post Order-Staff.	C	C	31
a. Signing of Post Orders.	C	C	32
b. Supervisor Inspection.	C	C	32
c. Post Order-Acknowledgment.	C	C	32
7. Protective Vests.	C	C	33

Formal Review of Administrative Serregation and Due Process

Valley State Prison for Women

COMPARATIVE STATISTICAL SUMMARY CHART

JULY 2007—JANUARY 2009 REVIEW FINDINGS

RATING	TOTAL 7/07	RATING % 7/07	TOTAL 1/09	RATING % 1/09
COMPLIANCE	60	90%	55	95%
PARTIAL COMPLIANCE	7	10%	2	3%
NONCOMPLIANCE	0		1	2%
NOT RATABLE	3		4	
TOTAL	70	100%	62	100%

Formal Review of Administrative Segregation and Due Process

Valley State Prison for Women

SUMMARY OF FACILITIES REVIEWED

VSPW includes 96 Ad Seg unit beds in this multi-level and Reception Center Facility. At the time of this review, the Facility was housing 92 Ad Seg inmates.

For the purposes of the review, the OAC team toured the Ad Seg units, reviewed unit records, and interviewed unit staff to determine the degree of compliance with established departmental policy, procedures, guidelines, and relevant court-established standards.

I

CONDITIONS OF SEGREGATED HOUSING

1. **Living Conditions.** In keeping with the special purpose of a segregated housing unit, and with the degree of security, control, and supervision required to serve that purpose, the physical facilities of special purpose segregated housing will approximate those of the general population.
(Authority cited: PC, Sections 2084, 5054, and 5058. Reference: CCR, Title 15, Sections 3343(a) and 3345; and DOM, Section 52080.33.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the physical facilities of VSPW's Ad Seg units approximate those of the general population.

- a. Housing units and all facilities therein will be properly maintained and regularly inspected to insure human decency and sanitation.
(Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in VSPW's Ad Seg units are provided a clean, properly maintained cell that approximates those of general population inmates. Telephonic and written repair requests are generated in the unit and are submitted to Plant Operations when repairs are needed. In addition, regularly scheduled maintenance is provided. General repairs are completed in a timely manner. Emergency work requests and health and safety issues are completed immediately.

- b. Control of vermin and pests will be maintained by a regular inspection by the institutional vector control.
(Authority cited: Toussaint v. McCarthy. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW's Ad Seg units control vermin and pests by conducting regular inspections of the unit. Regular inspections and pesticide applications provide for the control of vermin and pests. In the event of an emergency infestation, the Ad Seg unit Sergeant notifies Plant Operations and the situation is responded to immediately.

2. **Restrictions.** Whenever an inmate in Ad Seg is deprived of any usually authorized item or activity and the action and reason for that action is not otherwise documented and available for review by administrative and other concerned staff, a report of the action will be made and forwarded to the unit administrator as soon as possible.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(b); and DOM, Section 52080.33.1.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit staff utilize an Informational Chrono (CDC 128-B) to notice administration as required.

3. **Clothing.** No inmate in Ad Seg will be required to wear clothing that significantly differs from that worn by other inmates in the unit, except that temporary adjustments may be made in an inmates' clothing as is necessary for security reasons or to protect the inmate from self-inflicted harm. No inmate will be clothed in any manner intended to degrade the inmate.
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(c); and DOM, Section 52080.33.2.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed no instances wherein inmates housed in the Ad Seg units were required to wear clothing that significantly differed from that worn by other inmates in the unit; nor were inmates clothed in a manner intended to degrade or humiliate.

4. **Meals.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be fed the same meal and ration as is provided for inmates of the general population, except that a sandwich meal may be served for lunch. Deprivation of food will not be used as punishment.
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(d); and DOM, Section 52080.33.3.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, reviewed unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in Ad Seg are receiving the same meals and rations as provided for the general population inmates. No examples of food deprivation were found in the unit. Food trays are prepared in the Main Kitchen and then transported to the A Facility Dining Hall where the trays are distributed by unit staff to the Ad Seg inmates' cell. Food temperatures are taken and meal sample reports are being utilized appropriately.

5. **Mail.** Inmates assigned to Ad Seg, including special purpose segregated housing, will not be restricted in their sending and receiving of personal mail, except that incoming packages may be limited in number, and in content, to that property permitted in the segregated unit to which an inmate is assigned.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Sections 3138 and 3343(e); and DOM, Section 52080.33.4.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are not restricted from either sending or receiving personal mail, except those restrictions as defined in the CCR.

6. **Visits.** Inmates assigned to segregated housing, except for inmates assigned to security housing units (SHU), in accordance with Section 3341.5, shall be permitted to visit under the same conditions as are permitted inmates of the general population. Inmates assigned to SHUs shall be prohibited from physical contact with visitors.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(f); and DOM, Section 52080.33.5.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that all Ad Seg inmates are restricted to noncontact visits. The review team found VSPW's Ad Seg visiting process to be in accordance with current departmental and institutional policy and procedures.

7. **Personal Cleanliness.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be provided the means to keep themselves clean and well groomed.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(g); and DOM, Section 52080.33.6.)

- a. Showering and shaving will be permitted at least three times a week.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that shower facilities exist in the Ad Seg units. The Ad Seg inmates are provided the opportunity to shower three times per week. Razors for shaving are provided during shower periods.

- b. Haircuts will be provided as needed.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that hair care equipment is given to the inmate upon request. Inmates are placed in a holding cell in the Ad Seg units where they cut their own hair.

- c. Clothing, bed linen, and other laundry items will be issued and exchanged no less often than is provided for general population inmates.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that clothing, bed linen, and other laundry items are routinely issued upon reception in the Ad Seg units. These laundry items are exchanged on the same basis as the general population.

- 8. **Exercise.** Inmates assigned to special purpose segregation housing will be permitted a minimum of one hour per day, five days a week, of exercise outside their rooms or cells unless security and safety considerations preclude such activity. When special purpose segregated housing units are equipped with their own recreation yard, the yard periods may substitute for other out of cell exercise periods, providing the opportunity for use of the yard is available at least three days per week for a total of not less than ten hours a week.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(h).)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW's Ad Seg units provide controlled compatible, reintegrated mixed, and walk-alone yard group designations. All yard group designations are scheduled for exercise three times per week for a minimum of ten hours.

9. **Reading Material.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be permitted to obtain and possess the same publications, books, magazines, and newspapers as are inmates of the general population, except that the quantity may be limited for safety and security reasons. Library services will be provided and will represent a cross-section of material available to the general population.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(i).)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg inmates are provided reading material (soft back books) upon request. In addition, magazines and newspapers are available via subscription. Staff distributes and/or exchanges reading material weekly.

10. **Rule Changes.** The Notice of Change to the CCR shall be posted and made available to all inmates and staff. Notices shall be posted in inmate housing units, corridors, and other areas easily accessible to inmates, and provided to inmate lock-up units. The Classification and Parole Representative shall ensure that the inmate population has knowledge of the Board of Prison Terms/Narcotic Addiction Evaluation Authority Rules and of amendments.
(Authority cited: PC, Sections 2080 and 5058(a). Reference: DOM, Sections 12010.5.8 and 12010.8.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the Ad Seg units provide copies to the inmates of proposed changes or changes to the Director's Rules, the DOM, ABs, and memorandums that affect the inmate population.

11. **Telephones.** Institutions will establish procedures for making outside telephone calls by inmates in Ad Seg. Such procedures will approximate those for the work/training incentive group to which the inmate is assigned, except that individual calls must be approved by the supervisor in charge or the administrator of the unit before a call is made.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(j).)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW provides Ad Seg inmates telephone usage pursuant to the CCR, Title 15, Section 3343 (j). This includes emergency usage only.

12. **Institution Programs and Services.** Inmates assigned to segregated housing units will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering the security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance, and recreation.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(k).)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW provides programs to include commissary, library services, recreation, and spiritual counseling. In addition, religious publications are provided upon request.

13. **Visitation and Inspection.** Inmates assigned to Ad Seg, including special purpose segregated units, will be seen daily by the custodial supervisor in charge of the unit and by a physician, registered nurse, or medical technical assistant and, by request, members of the program staff. A timely response should be given to such requests wherever reasonably possible.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(l).)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that a custody supervisor is assigned to the Ad Seg units on both Second and Third Watches. In addition, management staff are available for interviews prior to the ICC hearings and CDC 114-D segregation placement administrative reviews. The Program Sergeant tours the units during First Watch to ensure any emergency is properly addressed. The medical/psychiatric staff are assigned to the unit on Second and Third Watches passing out medication, collecting sick call slips, and screening for medical and mental health needs.

- a. The custodial officer in charge of a disciplinary detention unit, segregation unit, or SHU, where inmates are segregated for disciplinary or administrative purposes, will ensure that inmates needing medical attention receive it promptly.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit custody staff notifies medical staff in the event of any medical situation or emergency. The general medical treatment line is conducted on Monday through Friday. The medical staff assigned to the Central Infirmary respond to First Watch medical emergencies. In addition, as stated above, the medical/psychiatric staff are assigned to the unit daily on Second and Third Watches.

14. **Management Cells.** Inmates assigned to segregated housing, who persist in disruptive, destructive, and dangerous behavior, and will not heed or respond to orders and warnings to desist, are subject to placement in a management cell, as provided in CCR, Title 15, Section 3332(f).

(Authority cited: PC, Sections 2601(d), 5054, and 5058. Reference: CCR, Title 15, Section 3343(m).)

- a. An inmate who persists in unduly disruptive, restrictive, or dangerous behavior, and who will not heed or respond to orders and warnings to desist from such activity, may be placed in a management cell on an order of the unit's administrator or, in his or her absence, an order of the watch commander.

Findings

NOT RATABLE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW does not maintain management cells.

- b. In addition to any necessary incident or disciplinary reports, the matter will be reported to the Warden, Superintendent, Chief Disciplinary Officer, or Administrative Officer of the Day (AOD), one of whom will review management cell resident status daily.

Findings

NOT RATABLE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW does not maintain management cells.

- c. An inmate, who requires management cell placement for longer than 24 hours, will be considered for transfer to a psychiatric management unit or other housing appropriate to the inmate's disturbed state.
(Reference: CCR, Title 15, Section 3332(f); and DOM, Section 52080.22.4.)

Findings

NOT RATABLE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that VSPW does not maintain management cells.

15. **Access to the Courts.** Inmates confined in Ad Seg for any reason will not be limited in their access to the courts. If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available library material to the inmate's quarters.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3164(a) and (d); DOM, Section 53060.10; and Toussaint v. Gomez.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed VSPW's Ad Seg units maintain a ducating system for Law Library access. The Law Librarian schedules Law Library access upon receipt of a Law Library request submitted by the inmate. Direct access to the Law Library is provided weekly. Preferred legal users and inmates with court deadlines are given priority access.

16. **Ad Seg Log.** A CDC 114 will be maintained in each Ad Seg units, including special purpose segregated units. One CDC 114 may serve two or more special purpose units, which are administered and supervised by the same staff members.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(a); and DOM, Section 52080.22.5.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114 is maintained within the unit. All entries are appropriately recorded in accordance with departmental policy and procedures.

17. **Isolation/Segregation Record.** A separate record will be maintained for each inmate assigned to Ad Seg, including special purpose segregated units. This record will be compiled on a CDC 114-A, and a CDC 114-A1.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(b); DOM, Section 52080.22.5; and IB 98/27.)

- a. All significant information relating to the inmate during the course of segregation, from reception to release, will be entered on the CDC 114-A in chronological order.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. The CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation.

- b. The CDC 114-A1 documents the inmate's current yard group designation.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review team reviewed a random sample of 10 CDC 114-A1s. Each (100 percent) of the 10 CDC 114-A1s reviewed documented the inmate's current yard group designation.

- c. The CDC 114-A1 documents the inmate's special information.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that each (100 percent) of the 10 randomly selected CDC 114-A1s reviewed documented the inmate's special information.

- d. The CDC 114-A1 will be maintained in the segregation log and be updated as new information is obtained. The Segregation Officer shall begin a new CDC 114-A1 at least every 90 days or at anytime this form becomes difficult to read.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that each (100 percent) of the 10 CDC 114-A1 reviewed documented a 90-day update as required.

18. **Safety.** Each Warden and Superintendent must have in effect, at all times, a plan approved by the Director for meeting emergencies delineated and required by the California Emergency Services Act of 1970.
(Authority cited: PC, Sections 5454 and 5458. Reference: CCR, Title 15, Sections 3302(b)(4) and 3303(a)(4); and DOM, Sections 52090.1, 2, 5, 6.1, 7, and 52090.19.)
- a. Institution heads shall maintain procedures for fire prevention and suppression. Fire protection practices and departmental policy mandate that all employees be instructed and trained concerning their duties and responsibilities should it become necessary to conduct an emergency evacuation for any fire or life threatening condition.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 2090.19.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that VSPW's Ad Seg units maintains a written policy, which specifies the unit's fire prevention regulations and practices.

- b. Staff and inmates shall be familiar with fire evacuation routes, exits, and procedures. An evacuation drill shall be conducted quarterly on each watch. Where such drills would jeopardize personal safety or Facility security, staff shall conduct a walk-through of the procedure. Such walk-through drills shall be monitored by the area supervisor to ascertain that actual evacuation could be accomplished as required.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that staff is trained with emergency evacuation plan procedures and evacuation routes are conspicuously posted within the unit. Documentation was present to support that quarterly simulated emergency fire drills, under varied conditions, are being conducted during all three watches. Each (100 percent) of the 12 required fire drills were documented.

- c. At the conclusion of fire drills, the area supervisor shall complete a Fire Drill Report (DS 5003) indicating the necessary information and forward a copy to the Fire Chief.
(Reference: CCR, Title 15, Section 3303(a)(4); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that DS 5003s are being completed and forwarded to the Fire Chief as required.

II

DUE PROCESS

Procedural safeguards are essential for effective transfers of prisoners from the general prison population to a maximum-security unit in order to segregate such prisoners for administrative reasons or purposes.

1. **Authority.** Authority to order an inmate to be placed in Ad Seg, before such action is considered and ordered by a classification hearing, may not be delegated below the staff level of Correctional Lieutenant, except when a lower level staff member is the highest ranking official on duty.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336; and DOM, Section 52080.25.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation on the CDC 114-D to confirm the level of the official ordering segregation placement was at the Correctional Lieutenant level or higher. The 1 remaining record did not contain a staff member's signature; rather "no" was written in.

2. **Written Notice.** The reason for ordering an inmate's placement in Ad Seg will be clearly documented on a CDC 114-D, by the official ordering the action at the time the action is taken.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336(a); DOM, Section 52080.25; and IB 98/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained a clearly stated date and reason(s) for placement on the CDC 114-D. The 1 remaining record contained an unclear placement date on a reissued CDC 114-D (documented the initial placement date).

3. **Receipt of the CDC 114-D.** A copy of the CDC 114-D with the "order" portion of the form completed, will, if practical, be given to the inmate prior to placement in Ad Seg, but not later than 48 hours after such placement.
(Authority: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3336(d) and 3339(b)(1); and DOM, Section 52080.25.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that indicated the inmates were given a copy of the CDC 114-D within 48 hours of placement. The 1 remaining record left this section blank.

4. **Confidential Material.** Documentation given the inmate concerning information from a confidential source shall include an evaluation of the source's reliability, a brief statement of the reason for the conclusion reached, and a statement of the reason why the information or source is not disclosed.
(Authority: PC, Sections 2081.5, 2600, 2601, 5054, and 5058. Reference: CCR, Title 15, Section 3321(b)(2); and DOM, Sections 52080.27.4 and 61020.9.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 27 were not ratable, as the reason for placement was not based on confidential information. Each (100 percent) of the 3 ratable records contained an appropriate Confidential Information Disclosure (CDC 1030) issued within the required time frame.

5. **Review.** On the first workday following an inmate's placement in Ad Seg, designated staff at not less than the level of Correctional Captain will review the order portion of the CDC 114-D. If retention in Ad Seg is approved at this review, the following determinations will be made at this level.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3337).)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1-2 days late) and 1 record documented a late counter signature by an Associate Warden when the review was conducted by an acting Captain (7 days late).

- a. Determine the appropriate assignment of staff assistance.
(Reference: CCR, Title 15, Section 3337(a).)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation of a determination for the assignment of a SA/IE.

- b. Determine the inmate's desire to call witnesses or submit other documentary evidence. If the inmate requests the presence of witnesses or submission of documentary evidence at the classification hearing on the reason or need for retention in segregated housing, an IE will be assigned to the case. A request to call witnesses must be submitted in writing by the inmate.
(Reference: CCR, Title 15, Section 3337(b).)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) contained documentation regarding the need for witnesses. The 2 remaining records left this section blank.

- c. Determine if the inmate has waived the 72-hour time limit in which a classification hearing cannot be held, as indicated on the CDC 114-D or the inmate desires additional time to prepare for a classification hearing.
(Reference: CCR, Title 15, Section 3337(c).)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 13 remaining records, 12 documented the inmate had waived the 72-hour preparation time absent the inmate's signature and 1 record left this section blank.

- d. Determine the most appropriate date and time for a classification hearing based upon the determination arrived at under Section 3337(a), (b), and (c), and the time limitations prescribed in CCR, Title 15, Section 3338.
(Reference: CCR, Title 15, Section 3337 (d).)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that the hearing time frames were appropriate based on the inmate's request. The 1 remaining record documented the hearing was held within 72 hours absent a signed waiver of time constraints by the inmate.

- e. Decision to retain in Ad Seg or release to unit/facility.

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that a decision was made to retain or release the inmate based on the administrative review.

6. **Classification Hearing.** An inmate's placement in temporary segregation shall be reviewed by the ICC within 10 days of receipt in the unit.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3335(c), 3338(a), (b), (c), (d), (g), (h), (i), 3375, and 3339 (b) (2); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg.

- a. The determinations arrived at in the classification hearing will be documented on the CDC 128-G. Such documentation will include an explanation of the reason and the information and evidence relied upon for the action taken. The inmate will also be given copies of all completed forms and of all other documents relied upon in the hearing, except those containing confidential information.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3338(i), 3375(g), and (h); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained documentation of the determinations arrived at during the ICC on the CDC 128-G.

- b. Was the hearing date recorded on the CDC 128-G?
(Reference: CCR, Title 15, Section 3375(g)(9); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained properly documented hearing dates on the CDC 128-G.

- c. Was the inmate's presence at the hearing documented on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(c) and 3375(g)(5); and DOM, Section 52080.27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained documentation to verify the inmate's presence or absence at the hearing on the CDC 128-G.

- d. Were the Hearing Officers identified on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3375(g)(6-8); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records identified the Hearing Officers on the CDC 128-G.

- e. If appropriate, were the SA and the IE identified on the CDC 128-G?
(Reference: CCR, Title 15, Section 3338(c)(i); and DOM, Section 62010.9.1.)

Findings

NOT RATABLE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

None of the 30 records reviewed were not ratable as the need for a SA/IE was properly documented on the CDC 114-D.

- f. If appropriate, was the witness portion addressed in the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(h) and (i); and DOM, Section 52080.27.3-.4.)

Findings

NONCOMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 29 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. The 1 ratable record did not address witnesses on the CDC 128-G when this information was not otherwise properly documented on the CDC-114-D.

- g. The completed CDC 128-G contains the yard group designation arrived at during the classification hearing.
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 98/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained documentation of the inmate's yard group designation on the CDC 128-G.

- h. The completed CDC 128-G documents the inmate's current cell status (single or double celled).
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 97/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained documentation of the inmate's current cell status on the CDC 128-G.

- i. The completed CDC 128-G documents the inmate's participation during committee and their agreement or disagreement with the ICC's action.
(Reference: CCR, Title 15, Sections 3338(i) and 3375(f)(2-6); and DOM, Section 52080.27.4.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 6 were not ratable as the hearing was held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 24 ratable records contained documentation of the inmate's participation with the ICC on the CDC 128-G.

7. **Classification Review.** Instead of the ICC reviewing each inmate's case every 30 days, inmates in Ad Seg for nondisciplinary reasons shall require routine review no more frequently than every 90 days, or when scheduled by staff for specific action. Inmates segregated for disciplinary reasons shall be reviewed by ICC at least every 180 days, or when scheduled by staff for specific action.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg units Classification Review.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Of the 30 records reviewed, 24 were not ratable as the inmate had not been on Ad Seg status long enough to require a follow-up review. Each (100 percent) of the 6 ratable records contained documentation of an ICC review as appropriate.

8. **The CSR Review.** All inmates retained in Ad Seg at their 10 day Ad Seg hearing shall be referred to the CSR for retention authorization at that initial review.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg units Classification Review.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in VSPW's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation of a referral to the CSR for review subsequent to initial ICC as appropriate.

III

ADMINISTRATION

1. **Training.** All staff working in specialized units are to receive specialized training centering on that unit's operation and program.
(Authority cited: PC, Sections 830.5, 832, 5054, 5058, 13600, and 13601. Reference: DOM, Section 32010.14.5.)

Findings

COMPLIANCE

The OAC audit team interviewed In-Service Training staff and examined the training records of all Ad Seg staff assigned to the unit for one year or more.

The audit revealed that 19 custody staff have been assigned to the Ad Seg units for one year or more. These 19 staff members are each required to have received 11 specialized training classes. Of the 209 required classes, 206 (99 percent) have been taken.

2. **The ICC.** The ICC shall consist of:
 - Warden or Regional Parole Administrator, or Deputy Warden or Assistant Regional Parole Administrator (chairperson);

- Correctional Administrator or Parole Administrator III (alternate Chairperson);
 - Psychiatrist or Physician;
 - Facility Captain;
 - Correctional Captain;
 - CC III or Parole Agent III, or CC II or Parole Agent II (Committee Recorder);
 - Assignment Lieutenant;
 - Educational or Vocational Program Representative; and
 - Other Staff as required.
- (Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3376(c)(2); and DOM, Section 62010.8.2.)**

Findings

COMPLIANCE

The OAC review team examined 30 central files, observed ICC, and reviewed CDC 128-Gs.

The review revealed that the composition of the ICC was in compliance with this standard.

3. **Record of Disciplinary.** All institutions will maintain a Register of Institution Violations. A Register of Institution Violations is a compilation of one completed copy of each rule violation report issued at a facility, maintained in chronological order.
(Authority cited: PC, Sections 2081, 5054, and 5058. Reference: CCR, Title 15, Sections 3326(a)(1-2); and DOM, Section 52080.15.1.)

Findings

COMPLIANCE

The OAC review team interviewed appropriate staff and examined the Disciplinary Log and Register of Institutional Violations.

The review revealed that the Institution maintains a Register of Institutional Violations, which meets the basic requirements of DOM. A tracking system is utilized to follow each disciplinary log number and adjudicated Rules Violation Reports.

4. **Post Order-Firearms.** Detailed instructions regarding the use of firearms shall be contained in the post orders of armed posts and shall be issued to staff that may regularly be required to use firearms in the course of their duties.
(Authority cited: PC, Sections 830, 832.5, 5054, and 5058. Reference: DOM, Section 55050.4.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that there are 4 identified gun posts (3 control booths and 1 yard gun) that require Use of Force Policies be addressed as part of the post orders. Each (100 percent) of the armed posts directed the staff member to read, understand, and become familiar with the departmental Use of Force Policy, CCR, Section 3268.

5. **Post Order-Job Site.** A copy of the post order shall be provided for every post and a copy shall be physically located at each job site.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a current copy of the post order is provided at the job site for each (100 percent) of the 29 Ad Seg posts.

6. **Post Order-Staff.** Supervisors, by authority of the Correctional Captain or area Manager, shall ensure that employees read and understand their post orders upon assuming their post.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.1.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that unit supervisors ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post (see below standard).

- a. Employees under post orders are required to sign and date the Post Order Acknowledgment Form (CDC 1860), verifying their understanding of the duties and responsibilities of the post. This shall be completed when the employee is assigned to the post, when the post order has been revised, or upon returning from an extended absence.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed there are 50 identified staff that are assigned to 29 Ad Seg unit posts. Of the 55 required signatures, 51 (93 percent) were present acknowledging the understanding of the post orders.

- b. At a minimum of once each month, supervisors shall inspect the post orders and sign the CDC 1860. Any torn or missing pages noted shall be replaced as soon as practical.

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that the custodial supervisors assigned to the Ad Seg units inspect the CDC 1860, on a monthly basis.

- c. A CDC 1860 shall be attached to each post order and shall be utilized to verify that the assigned staff member has read and understood the post orders for their post. The CDC 1860s shall be kept for a period of one year from the date of last entry unless deemed evidentiary (then retained until no longer needed).

(Authority cited: PC, Sections 5054 and 5058. Reference DOM, Section 51040.6.2.)

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that VSPW utilizes a CDC 1860 to allow the staff member to verify, by signature, that they have read and understand the order for the post and this is then countersigned by the supervisor. Each (100 percent) of the 29 post orders reviewed contained the current acknowledgment sheet.

7. **Protective Vests.** All CDCR employees, regardless of personnel classification, entering a SHU, Special Management Program, Ad Seg, Temporary Detention Unit, Condemned Housing Unit, Psychiatric Services Unit, or Special Behavioral Treatment Program, shall wear a Stab Resistant Vest when the employee is:
- In direct contact with inmates/wards/patients within the aforementioned units (unrestrained or restrained).
 - Escorting inmates/wards/patients housed within the aforementioned units anywhere on institution grounds.
 - On the aforementioned unit tiers.
- (Authority cited: DOM, Section 33020.16.2)**

Findings

COMPLIANCE

The OAC review team toured VSPW's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that all required staff wear a protective vest while in the Ad Seg units.

Review of Administrative Segregation and Due Process

Valley State Prison for Women

GLOSSARY

AB	Administrative Bulletin
Ad Seg	Administrative Segregation
AOD	Administrative Officer of the Day
Ad Seg units	Ad Seg Unit
CC	Correctional Counselor
CCR	California Code of Regulations
CDCR	California Department of Corrections and Rehabilitation
CDC 114	Isolation Log Book
CDC 114-A	Isolation/Segregation Profile
CDC 114-A1	Inmate Segregation Profile
CDC 114-D	Order for Placement/Retention in Administrative Segregation
CDC 128-G	Classification Chrono Form
CDC 1030	Confidential Information Disclosure
CDC 1860	Post Order Acknowledgment Form
CSR	Classification Staff Representative
DOM	Department Operations Manual
DS 5003	Fire Drill Report
IB	Information Bulletin
ICC	Institution Classification Committee
IE	Investigative Employee
OC	Oleoresin Capsicum
PC	California Penal Code
OAC	Program and Fiscal Reviews Branch
SA	Staff Assistant
SHU	Security Housing Unit
VSPW	Valley State Prison for Women

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

VALLEY STATE PRISON FOR WOMEN

JANUARY 5 THROUGH JANUARY 16, 2009

PRELIMINARY

CONDUCTED BY
THE AUDITS BRANCH



TABLE OF CONTENTS

<u>SUBJECT</u>	<u>PAGE</u>
Introduction	I
Audit Scope	II
Symptoms of Control Deficiencies	III
Corrective Action Plan	IV
Executive Summary	V
Findings and Recommendations	
I. Administrative Concerns	1
II. Health and Safety	4
III. Internal Control	11
IV. Late Detection and Additional Workload	14
V. Policies and Procedures	23
VI. Penalties and Fines	24
VII. Follow-up to April 2008 Food Facility Inspection	24
Glossary	25
Attachment A – Sample Corrective Action Plan	

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

VALLEY STATE PRISON FOR WOMEN

INTRODUCTION

The California Department of Corrections and Rehabilitation's (CDCR), Office of Audits and Compliance (OAC), Audits Branch, conducted an audit of Business Services at Valley State Prison for Women (VSPW). The purpose of the audit was to analyze and evaluate the level of compliance with State and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The following areas were audited:

- Personnel Transactions;
- Classification and Pay;
- Payroll/Accounting;
- Position Control;
- Delegated Testing;
- Procurement;
- Materials Management (i.e., Warehousing and Property);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety;
- Occupational Health and Safety; and
- Follow-up to the April 2008 Food Facility Inspection that was performed by the Office of Risk Management (ORM).

The fieldwork was performed during the period of January 5 through January 16, 2009. The exit conference was held on January 16, 2009.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Deborah Brannon, Michael Robinson, Naomi Banks and Saihra Posas conducted the audit. In addition, Chris Alipaz, Assistant Correctional Food Manager, Correctional Training Facility, Michelle Stephens, Staff Services Analyst, Office of Personnel Services, Headquarters, David Crowder, Hazardous Materials Specialist, Kern Valley State Prison, and Bruce Hubble, Correctional Plant Manager I, Central California Women's Facility, provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of prior reports, test of transactions, interviews, observations, periodic management briefings, an exit conference, and issuance of the preliminary audit report.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

VALLEY STATE PRISON FOR WOMEN

AUDIT SCOPE

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of VSPW's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions;
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.

SYMPTOMS OF CONTROL DEFICIENCIES

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

VALLEY STATE PRISON FOR WOMEN

CORRECTIVE ACTION PLAN

VSPW's corrective action plan (CAP) is due within 30 days of receipt of the preliminary audit report. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to Alberto.Caton@cdcr.ca.gov and Rose.Mitjans@cdcr.ca.gov. Send the original to Alberto Caton, OAC, PO Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact Alberto Caton, Correctional Administrator at (916) 255-2717.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

VALLEY STATE PRISON FOR WOMEN

EXECUTIVE SUMMARY

The Audits Branch conducted an audit of Business Services at VSPW during the period of January 5 through January 16, 2009. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. Prior to this audit the Audits Branch conducted an audit from June 3 through June 21, 2002. Unresolved findings are identified in this report as "Prior Finding".

An exit conference was held on January 16, 2009, with the Warden, Chief Deputy Warden and Business Services. The Audits Branch requested that VSPW provide a CAP within 30 days after receipt of the preliminary audit report.

Areas audited:

- Personnel Transactions;
- Classification and Pay;
- Delegated Testing;
- Food Services;
- Payroll/Accounting;
- Position Control;
- Procurement;
- Materials Management (i.e., Warehousing and Property);
- Plant Operations;
- Inmate Trust Accounting;
- Environmental Health and Safety;
- Occupational Health and Safety; and
- Follow-up to the April 2008 Food Facility Inspection that was performed by the ORM.

Forty findings are identified in the preliminary audit report, categorized under the following topics:

Category	Number of Findings	Page Number
Administrative Concerns	6	1
Health and Safety	12	4
Internal Control	7	11
Late Detection and Additional Workload	12	14
Policies and Procedures	1	23
Penalties and Fines	1	24
Follow-up to April 2008 Food Facility Inspection	1	24
Total	40	

The executive summary provides the category, a brief description of the finding, criteria, impact, and prior finding, if applicable.

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Personnel (34 percent), Procurement (28 percent), Accounting (23 percent), Food Services (17 percent), and Plant Operations (10 percent).

I. ADMINISTRATIVE CONCERNS

A. Position Control

VSPW has more positions than authorized by the Governors Budget and the Department of Finance. As of January 13, 2009, there are 26 Correctional Officers (CO) paid out of the 918 blanket. State Administrative Manual (SAM).

Impact: This issue results in over expending the budget authority by approximately \$354,249.

The Periodic Position Control (PPC) Report, dated January 1, 2009, notes 71 positions that are over expending VSPW's budget authorization. Payroll Procedures Manual (PPM).

Impact: This condition results in over expending the budget authority.

The State Controller's Periodic Position Control Report is not reconciled on a monthly basis. PPM.

Impact: This condition results in the late detection of errors and irregularities, lost of positions, over-expenditure of the budget authority and additional workload.

B. Personnel Transactions

Organizational charts did not reflect the current organizational structure, but were updated on January 9, 2009. CDCR Memorandum.

Impact: This condition makes it difficult to reconcile the position number that employees are paid out of and creates additional workload.

The Personnel Office did not establish Accounts Receivable (AR) for Custody Staff who did not submit Employee Attendance Record (CDC 998-A) forms, for approximately two years. Additionally, 48 percent of Correctional Counselors I and 13 percent of Custody Staff have not submitted their CDC 998-As to the Personnel Office for the October 2008 pay period. Administrative Bulletin (AB) 04-01. **Prior Finding**

Impact: This issue could result in the loss of State funds, a financial hardship on employees, possible manipulation and unauthorized use of time, difficulty detecting errors, and/or irregularities, and additional workload.

A Hazardous Material Specialist position was not established to comply with the 1992 California Department of Toxic Substance Control and the CDCR consent agreement that settled an enforcement case. Hazardous Waste California (HWCA).

Impact: This condition makes it difficult to determine accountability over the Hazardous Waste Management Program and may increase the threat to life, health, and safety.

II. HEALTH AND SAFETY

A. Occupational Health and Safety

The written site specific Exposure Control Plan (ECP) has not been updated reviewed and approved since 1999/2002. Division of Correctional Health Care Services (DCHCS).

Impact: This condition may result in employees being unaware of changes in current practices, policies and procedures, and may impact training.

Personal Protective Equipment (PPE) is expired and incomplete. Also, periodic inventories are not conducted (i.e., noted at housing units C-3 and C-4). Injury and Illness Prevention Plan (IIPP).

Impact: This condition may result in staff coming in contact with hazardous substances that may transmit diseases.

The Exposure Control Committee (ECC) does not maintain a Sharps Injury Log. DCHCS.

Impact: This condition results in difficulty tracking the details related to sharps injuries (i.e., time, date, person, witnesses, substance, location, etc.).

The ECC does not conduct at least four meetings annually. DCHCS.

Impact: The contents of the ECP may not be reviewed and updated in a timely manner. As a result, staff may come in contact with hazardous substances that may transmit diseases.

At accumulation sites, bio-hazardous waste is not maintained separately from items such as, wheel chairs, medical appliances, and cleaning supplies. This was noted at the Main Infirmary and C Yard Clinic. Health and Safety Code (H&SC).

Impact: This condition may result in staff coming in contact with hazardous substances that may transmit diseases.

B. Environmental Health and Safety

There are deficiencies related to the Hazardous Waste and Management Program. Of the 13 locations reviewed, the following 9 areas were deficient: Electrician, Paint, Small Engine Shops, Garage, Hazardous Waste Storage, Medical, Water Treatment, Warehouse, and Central Kitchen. For example, waste containers do not

have a universal waste label, documents and receipts for Hazardous Waste pick-ups are not retained, incompatible chemicals are stacked on top of each other, and hazardous waste is located in a flammable cabinet and does not have an Accumulation Start Date (ASD), etc. California Code of Regulations (CCR) and Department Operations Manual (DOM).

Impact: These conditions may result in difficulty responding to emergencies and late detection of missing chemicals.

C. Plant Operations

Staff was not supplied with current hazard information pertinent to their work assignments. Also, the Codes of Safe Practices and Hazard Evaluations in Plant Operations have not been updated since 1995 and 2000. DOM and IIPP.

Impact: This condition may result in duties not being performed in a safe and healthy manner.

Safety meetings (e.g., tailgates) are not conducted for each maintenance section at least every 10 days, and the staff does not take minutes of the meetings. This occurred in 80 percent of the shops tested. CCR, Title 8.

Impact: This issue could result in Plant Operations not maintaining an effective IIPP program.

There are deficiencies noted at the Maintenance Mechanic, Groundskeeper, Carpenter, and Stationary Engineer Shops related to the Hazardous Communication Program. These deficiencies related to Material Safety Data Sheets (MSDS), Chemical Inventories, Labels and Containment. CCR, Title 8, and DOM.

Impact: This condition could result in an increased threat to life, health, and safety.

D. Food Services

Food Carts used to transport food from the Satellite Kitchen to the Administrative Segregation Unit are not sufficient to retain food at safe temperatures for extended times. H&SC.

Impact: This issue could result in the development of food borne illnesses, unnecessary administrative labor cost, and inmate appeals/lawsuits.

Food is not dated when received from the warehouse. DOM.

Impact: This issue makes it difficult to use the first-in, first-out method of inventory control.

Serving trays are not properly stacked to facilitate adequate drying. This was noted in all facilities inspected. Trays are double stacked and wet trays are towel dried. H&SC.

Impact: This condition results in the development of bacteria, odors, and unnecessary administrative labor cost for handling inmate appeals.

III. INTERNAL CONTROL

A. Personnel Transactions

The physical organization of the Personnel Office and the location of the timekeeper may result in inefficiencies and difficulty monitoring transactions. Additionally, there is one timekeeper who has not received training and is working in a different location from the Personnel Office. SAM.

Impact: This condition makes it difficult to prioritize and monitor transactions, avoid the possibility of manipulation, and it increases workload.

Current hiring documents are maintained in a location outside of the Personnel Office (i.e., connex box). SAM.

Impact: This condition results in difficulty reviewing current hires in the event of a complaint and accessing documents maintained in the hiring file (i.e., questions, selection information, certification list, applications, etc.).

B. Inmate Trust Accounting

There are approximately 1,000 obsolete checks that were not destroyed. SAM.

Impact: This condition may result in late detection of missing State funds.

The cash reconciliations prepared by the Trust Office were not signed and dated by the preparer and reviewer on a consistent basis. SAM.

Impact: This condition may result in late detection of errors and/or irregularities.

C. Materials Management/Warehousing

A physical inventory of property was started in August 2007. However, the adjustment and reconciliation of records were never completed. Additionally, there is no Missing Property Report. DOM.

Impact: This condition may result in late detection of errors, irregularities, theft, and/or misappropriation.

The location of physical property does not reconcile to the Property Control System. In addition, equipment was improperly tagged (e.g., illegible, missing, or blank tags). DOM.

Impact: This condition may result in the late detection of errors, irregularities, theft, and/or misappropriation.

D. Procurement

Duty statements are missing or not signed for 5 of the 27 employees sampled in the Procurement Office. SAM.

Impact: This issue results in difficulty determining the duties and responsibilities of staff.

IV. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel Transactions

Three employees received Institutional Worker Supervision Pay (IWSP). They were not entitled to IWSP because they did not meet the criteria for payment. Department of Personnel Administration (DPA).

Impact: These issues result in inaccurate recordkeeping for the inmates and overpayment to the employee.

Dock time is not posted in the California Leave Accounting System (CLAS). Additionally, the Post Personnel Assignment System (PPAS) does not reflect the changes made to leave credits used when an employee opts to use leave credits instead of dock. AB.

Impact: This issue results in late detection of inappropriate use of leave and inaccurate attendance records.

Payroll documents are not certified (e.g., signed, and dated) by Personnel Staff. The following documents require certification: Absences without Pay Report (Std. 603); Time and Attendance Report (Form 672); and Miscellaneous Payroll/Leave Actions (Std. 671). In addition, a pencil and white out was used on the payroll documents. PPM. **Prior Finding**

Impact: This issue could result in manipulation of time paid and late detection of errors or irregularities.

B. Classification and Pay

Hiring interview packages do not show a clear scoring process, the interviewer's signature is missing; designated competitive criteria and overall ratings are also missing. Additionally, an interview package for a correctional sergeant was missing the completed interview package. CDCR Memorandum.

Impact: These conditions result in difficulty justifying the selection, in the event a complaint is filed and a hearing scheduled with the State Personnel Board.

During the review of the Personnel Action/Request for Admission (CDC 647) process, it was noted that procedures are not followed when processing transactions that involve positions. For example, the CDC 647s are not submitted when moving staff from one position to another. Office of Personnel Services (OPS) and Personnel Services Operations Manual (PSOM).

Impact: This condition results in improper appointment documentation, possible circumvention of the process; late detection of errors, irregularities, and/or misappropriation.

Twenty CDC 647 packages were reviewed for completeness and the following deficiencies were found: four appointments were made to classifications without getting approval from the OPS, (Request for Certification (Std. 625) were not forwarded to headquarters as required), limited-term (LT) appointments were not justified on the CDC 647 (or in package), one employee was not tested for TB, and

position numbers were missing on organizational charts, etc. PPM, State Personnel Board (SPB), and Personnel Management Policy and Procedures Manual (PMPPM).

Impact: This condition could result in possible circumvention; excessive budget expenditures, approval of misallocated positions, and an employee could have been infected with TB and allowed into the facility. DPA, Classification and Pay Guidelines, OPS, and PSOM.

Twenty out-of-class (OOC) assignments were randomly selected for review. The following deficiencies were noted: extensions were not sent to headquarters for approval, as required; also, recruitment efforts are not documented for original or extensions to show the attempt to fill vacancies through the appropriate process. DPA, OPS, and PSOM.

Impact: This condition could result in the revoking of the OOC delegation by DPA.

C. Plant Operations

There are deficiencies related to the cross-connection program (i.e., backflow devices). For example, the master list does not reconcile to the Standard Automated Preventive Maintenance System (SAPMS) database, and it is difficult to determine the number of backflows located throughout the Institution. California Plumbing Code (CPC) and Department of Health Services (DHS).

Impact: This issue results in difficulty determining whether backflow tests have been performed.

There are deficiencies related to the record keeping, testing, and maintenance of emergency generators. For example, the National Fire Protection Association (NFPA) standards are not adhered to, record keeping is inadequate, and logs are not standardized, and certified with signatures and/or initials. San Joaquin Valley Air Pollution Control District (SJVAPCD) and CCR, Title 15.

Impact: This issue makes it difficult to determine and validate that emergency generators are tested timely, and properly maintained.

There are deficiencies related to the preventive maintenance (PM) program for equipment located in the food services department. For example, equipment is not identified with the SAPMS tag, PM procedures have not been approved, scheduled, and PM is not always performed on equipment. CCR, Title 15, SAPMS, Departmental Plant Operations Maintenance Procedures Manual (DPOMPM), and California Retail Food Code (CRFC).

Impact: This condition may render the PM program ineffective, decrease efficiency, increase downtime, and result in additional cost due to repairs.

The Inmate Work Supervisor's Time Logs (CDCR 1697) are not properly maintained in the maintenance mechanics, carpenters, stationary engineers, and groundskeepers' shops. CCR, Title 15.

Impact: This issue results in inaccurate documentation of inmate work time.

D. Food Services

CDCR 1697s are not completed thoroughly and appropriately by Custody Staff at the A Yard and B Yard Satellite Kitchens. For example, initials are used instead of signatures, exceptional time is not always explained, and entire days are not completed. CCR, Title 15.

Impact: This issue could result in overpayment of inmate time worked and inaccurate information reported regarding inmates time.

V. POLICIES AND PROCEDURES

There are no local operating procedures governing the work of the contracted pest control technician. As a result, staff and inmates are not notified 48 hours prior to chemical application. Bargaining Unit (BU), CCR, Title 15, and DOM.

Impact: Staff and inmates may not be notified timely of the potential hazards associated with applying pesticides. Essentially, this issue could result in an increased threat to life, health, and safety.

VI. PENALTIES AND FINES

Lump sum payments for separations were not issued within 72 hours. Of the 12 lump sum payments reviewed, 5 were not issued within 72 hours. CDCR Memorandum.

Impact: This condition could result in severe penalties and prosecution. Also, the Institution could be held liable for treble damages.

VII. FOLLOW UP TO THE MAY 2008 FOOD FACILITY INSPECTION PERFORMED BY THE ORM

As of January 15, 2009, six deficiencies, relating to the Central and Satellite Kitchens, have been resolved. The Central Kitchen's blast chiller rack rotator needs repair because the racks are not rotating.

Impact: It takes longer to chill the food than what is noted in the design specifications.

FINDINGS AND RECOMMENDATIONS

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Personnel (52 percent), Accounting (40 percent), Procurement (38 percent), Plant Operations (28 percent), and Food Services (13 percent).

I. ADMINISTRATIVE CONCERNS

A. Position Control

1. Hiring Over Budget

VSPW has more positions than authorized by the Governors Budget and the Department of Finance. As of January 13, 2009, there are 26 COs paid out of the Salary and Wages/Other (918 blanket).

This issue results in over expending the budget authority by approximately \$354,249.

SAM, Section 8531, Established Positions, states: "No employee may be appointed except to a position which has been properly established and approved by the Department of Finance to fix its class title, duration, organizational function, and the budget allotment from which the salary is payable."

Recommendation

Review the current number of CO positions in the 918 blanket and take the appropriate action.

2. PPC Report

The PPC Report, dated January 1, 2009, notes 71 positions that are over expending VSPW's budgeted authorization. For example, 14 fractional positions are expended at a full-time rate instead of the fraction, 6 positions are over expended due to a transaction error (i.e., lump sum payment, appointment dates that overlap a separation date, overtime payment), and 54 positions have not been established. However, the 54 positions not established, do have a Change in Established Position (Std. 607) in process.

This condition could result in the over expending of the budget authority.

PPM, PPC Report Monthly, C 309, states: "Periodic Position Control (PPC) Report lists each position in which personnel-months expended exceed personnel-months authorized by form Std. 607; i.e., payments were issued from unauthorized positions."

Recommendation

Review the PPC Report to identify those personnel transactions that need correction and correct the items. Also, provide training to staff on the issues identified on the report and monitor the process for compliance.

3. Reconciliation of the PPC Report

Reconciliation of reports related to position control transactions is not performed. For example, the State Controller's Office's (SCO) PPC report is not reconciled on a monthly basis. A six month test period was requested and VSPW only provided reports for June, July, August 2008 and January 2009.

This condition results in late detection of errors and irregularities, loss of positions, over-expenditure of budget authority and creates additional workload.

PPM, PPC Report Monthly, Section C 309, states in part: "Each agency must review the report and take necessary corrective action. Please note that working the PPC report will prevent positions from reflecting on the Vacant Position Report during the fiscal year end process...."

Recommendation

Provide training to the Personnel Specialists regarding reconciliation of the PPC report and ensure that SCO's reports are used to reconcile on a monthly basis. Also, monitor the process for compliance.

B. Personnel Transactions

1. Organizational Charts

Organizational charts do not reflect the current organizational structure, but were updated on January 9, 2009.

This issue makes it difficult to reconcile the position number that employees are paid out of, and creates an additional workload.

CDCR Memorandum, Subject: CDCR Organization Charts, dated December 13, 2007, states in part: "In accordance with the Delegation Program Agreement which exists between the CDCR and DPA...As a condition of the agreement, CDCR is required to maintain up-to-date staffing records and information, including organization charts...."

Recommendation

Ensure that the organizational charts accurately reflect the organizational structure and correct classification, position number, and name of current employees.

2. Accounts Receivables (Prior Finding)

The Personnel Office has not established ARs for Custody Staff who have not submitted CDC 998-A forms, for approximately 2 years. Additionally, 48 percent of Correctional Counselors I and 13 percent of Custody Staff have not submitted their CDC 998-As to the Personnel Office for October 2008.

This condition could result in the loss of State funds, a financial hardship on employees, possible manipulation and unauthorized use of time, difficulty detecting errors, and/or irregularities, and additional workload.

AB 04-01, Attendance Record Policy, BU 06, and Aligned Non-Represented Employees, Section AR, states: "Leave taken without available/approved leave credits are subject to an AR, the recovery of overpayment for the unapproved leave. Failure to turn in a completed CDC Form 998-A may result in an AR established in accordance with BU 06, MOU, Section 15.12, and Side letter 4."

Recommendation

Develop a plan to process the ARs for the last three years. Also, establish procedures to comply with the policy and monitor the process for compliance.

3. Hazardous Material Specialist

A Hazardous Material Specialist position was not established to comply with the 1992 California Department of Toxic Substance Control and the CDCR consent agreement that settled an enforcement case.

This condition makes it difficult to determine accountability over the Hazardous Waste Management Program and may increase the threat of life, health, and safety.

HWCA 90/91-021, 90/91-027, and 90/91-029, with the Federal Environmental Protection Agency, and the Health and Safety Code 25187, states in part: "The CDCR is bound to have a Hazardous Materials Specialist designated at each institution and twelve at headquarters . . . Establish and/or redirect a Hazardous Materials Specialist at each facility as part of the department wide commitment to the Hazardous Materials Management Program."

Recommendation

Establish and/or redirect a Hazardous Materials Specialist at VSPW as required in the consent agreement.

II. HEALTH AND SAFETY

A. Occupational Health and Safety

1. ECP

The written site specific ECP has not been updated, reviewed, and approved since 1999/02. The updates should include but not be limited to:

- Post Exposure Providers.
- Locations of PPE.
- Policy/Procedures for Soiled Linen, Infection Control Practices, and Employee Exposure to Inmate Gassing.

This condition may result in employees being unaware of changes in current practices, policies and procedures, and may impact training.

The Division of Health Care Services (DCHCS), BBP, and ECP, REVIEW AND UPDATE OF THE ECP, states: "The department recognizes the importance of keeping the ECP up-to-date. This will be the responsibility of the Exposure Control Facilitator (ECF) and the Exposure Control Committee (ECC). All proposed changes shall be submitted to the Public Health Section (PHS) for review and approval. The PHS is responsible for providing updates and revisions as necessary. The ECP shall be reviewed and updated under the following circumstances. A. Annually...."

Recommendation

Comply with the DCHCS, BBP, ECP, and update the ECP.

2. PPE

PPE kits are expired and incomplete. Also, periodic inventories are not conducted (i.e., noted at housing units C-3 and C-4).

This condition may result in staff coming in contact with hazardous substances that may transmit diseases.

VSPW's IIPP, Correcting Workplace Hazards, states: "Reinforcing and explaining the need for proper personal protective equipment and ensuring its availability."

VSPW's OP number 10007, Section V, B (b) states: "Immediately cleanse the contaminated area with soap and warm water and/or use the solutions contained in the housing unit/respective area PPE kit."

Recommendation

Maintain and complete updated PPE kits.

3. Sharp Logs

The ECC does not maintain a sharps injury log.

This condition results in difficulty tracking the details related to sharps injuries (i.e., time, date, person, witnesses, substance, location, etc.).

DCHCS's BBP and ECP, states: "The ECC shall establish, maintain, and regularly review the sharps injury log B. Each sharps incident shall be recorded on the Log within 14 working days of the date the incident was reported- 2.5 - 1/11/02 C. The Log shall include sharps exposure incidents and the details of each incident using the CDC form 7219 (Rev. 9/77) Medical Report of Injury or Unusual Occurrence (see Chapter 9, page V.App.3) and the testimony of the exposed employee. The details necessary to include are described in Chapter 5, Section IV, Part C: Immediately Following an Exposure Incident, the Health care Staff shall...2, Document the Exposure. The following information must be included on the Sharps Injury Report Log (see Chapter 9, Appendix, Page II.App.1)...."

Recommendation

Maintain a sharps injury log in accordance with the DCHCS guidelines and recommendations.

4. ECC Meetings

The ECC does not conduct the required four meetings annually.

The contents of the ECP may not be reviewed and updated in a timely manner. As a result, staff may come in contact with hazardous substances that may transmit diseases.

DCHCS's BBP and ECP, Review and Update of the ECP, states: "The department recognizes the importance of keeping the ECP up-to-date. This will be the responsibility of the Exposure Control Facilitator (ECF) and the Exposure Control Committee (ECC). Exposure Control Committee: This committee, with its appointed chair(s), will review the contents of the ECP and establish the specifics of its function throughout the institution. In some institutions, this committee's function is combined with other similar committees, but its functional presence is legally mandated by the California Code of Regulations (CCR),

Title 8, General Industry Safety Orders, Article 100, Section 3203, (see Chapter 9, Appendix, page I.App.2). The ECC must include the Warden of the institution or their designee; the CMO or their designee; a representative from the Union of American Physicians and Dentists (Unit 16), the California Correctional Peace Officers Association (Unit 6), the Health and Safety Office, and other interested staff as may be deemed appropriate. Meeting Frequency: The committee will meet no less than quarterly, and more often as may be indicated by circumstances of employee BBP exposures.”

Recommendation

Meet and convene quarterly.

5. Bio Hazardous Waste

At accumulation sites, Bio-hazardous waste is not maintained separately from items such as, wheel chairs, medical appliances, and cleaning supplies. This was noted at the Main Infirmary and C Yard Clinic.

This condition may result in staff coming in contact with hazardous substances that may transmit diseases.

H&SC, Section 118275, states: “To containerize or store medical waste, a person shall do all of the following: (a) Medical waste shall be contained separately from other waste at the point of origin in the producing facility. Sharps containers may be placed in biohazard bags or in containers with biohazard bags.”

Recommendation

Comply with the Medical Waste Management Act, Sections 117600-118360 and contain items separately in accordance with H&SC, Section 118275.

B. Environmental Health and Safety

There are deficiencies related to the Hazardous Waste Management Program in the following areas:

Electricians shop:

- Fluorescent light bulb waste is placed in inappropriate size containers.
- Waste containers do not have a universal waste label affixed to them.
- Hazardous waste containers have hazard warning labels on them that do not reflect the correct hazard of the contents.

Garage:

- Documents and receipts for hazardous waste pick-ups are not retained.

Hazardous Waste Storage:

- Hazardous waste is not stored in buildings and there is no secondary containment available for these wastes.
- Incompatible chemicals are stacked on top of each other.

Medical:

- The hazardous fixer waste container in the x-ray department is not labeled.

Paint shop:

- Hazardous waste located in a flammable cabinet does not have an ASD.

Small Engines Shop:

- A used oil container lacks a label with the proper information.

Water Treatment:

- Bulk chemicals are stored outside next to the building and unsecured without secondary containment.

Warehouse:

- Building does not have a hazard placard posted for the chemicals it stores.

Central Kitchen:

- Chemicals are stored under a desk.

These conditions may result in difficulty determining the contents of containers, responding to emergencies, and late detection of missing chemicals.

CCR, Title 8, Section 5194, Hazardous Communication Program (HCP), states in part: "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility...Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, and volatile substances is appropriately trained."

DOM, Section 52030.2, states: "This procedure shall establish a method for the identification, receipt, training, issue, handling (or use), inventory, and disposal of hazardous substances, which is in compliance with all federal, State, and local laws or ordinances."

DOM, Section 52030.4.1, states in part: "Maintain a constant daily inventory of all hazardous substances used or stored...."

Recommendation

Comply with the CCR, Title 8 and Title 15, and the DOM.

C. Plant Operations**1. Communicating Work Place Hazards**

Staff is not supplied with current hazard information pertinent to their work assignments. Also, the Codes of Safe Practices and Hazard Evaluations in Plant Operations have not been updated since 1995 and 2000.

This condition may result in duties not performed in a safe and healthy manner.

DOM, Section 31020.3, states in part: "All systems shall meet or exceed the minimum safety and health standards of the General industry Safety Orders (GISO), CCR (8); Manual of Standards for Adult Correctional Institutions (ACA); National Fire Protection Association (NFPA) Life Safety Codes; H&SC; and all other applicable federal, state, and local laws, ordinances, and codes regarding occupational safety, environmental health, and fire prevention and control."

VSPW's IIPP, Section IX, states in part: "Recording Keeping Documents related to the IIPP are maintained by the SO, Supervisors, RTWC and IST. CCR, Title 8, Section 3203, requires certain documents related to the IIPP be kept for at least one year. VSPW, IIPP, Section X, Local procedures include but are limited to Code of Safe Practices and Job hazard analysis...."

Recommendation

Comply with DOM and VSPW's IIPP program.

2. Safety Meetings

Safety meetings are not conducted for each maintenance section at least every 10 days, and the staff does not take minutes. This occurred in 80 percent of the shops tested.

This issue could result in Plant Operations not maintaining an effective IIPP program.

CCR, Title 8, Article 3, Section 8406(e), IIPP, states in part, ". . . supervisory personnel shall conduct "toolbox" or "tailgate" safety meetings with their crews at least weekly on the job to emphasize safety. A record of such meetings shall be kept, stating the meeting date, time, place, supervisory personnel present subjects discussed and corrective action taken, if any, and maintained for inspection."

Recommendation

Comply with the CCR, Title 8 in regards to safety meetings.

3. HCP

The Audits Branch noted the following deficiencies regarding the HCP:

Maintenance Mechanics Shop:

- Indexing of the MSDS binder is not user friendly.
- The perpetual chemical inventory does not reconcile.

Grounds-keepers Shop:

- Pesticides and herbicides and other chemicals are not separated.
- Porous wooden pallets are used as secondary containment.
- MSDS are not maintained and updated.
- Indexing of the MSDS binder is not user friendly.
- Hazardous materials connex is disorganized and filthy.
- Secondary containers are not labeled.
- Products are not maintained in sound containers.

Carpenter Shop:

- Indexing of the MSDS binder is not standard and not user friendly.
- A daily perpetual inventory is not conducted.

Stationary Engineers:

- Secondary containers are not labeled.

This condition results in an increased threat to life, health, and safety.

CCR, Title 8, Section 5194, Hazard Communication Program, states in part: "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility . . . Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, volatile substances is appropriately trained...."

DOM, Section 52030.2, states: "This procedure shall establish a method for the identification, receipt, training, issue, handling (or use), inventory and disposal of hazardous substances, which is in compliance with all federal, state and local laws or ordinances."

DOM, Section 52030.4.1, states in part: "Maintain a constant daily inventory of all hazardous substances used or stored...."

Recommendation

Comply with the Hazard Communication Program and the DOM.

D. Food Services**1. Food Carts**

Food carts used to transport food from the Satellite Kitchen to the Administrative Segregation Unit is not sufficient to retrain food at safe temperatures for extended times. Additionally, some inmates were served food on paper plates.

This issue could result in the development of food borne illnesses, unnecessary administrative labor cost, and inmate appeals/lawsuits.

H&SC, Section 113996 (a), states in part: "Except during preparation, cooking, cooling...potentially hazardous food shall be maintained at or above 135°F...."

Recommendation

Purchase (heated) transport carts. Ensure that the Correctional Supervising Cook observes feeding in the Administrative Segregation Unit at least three times a week. Also, purchase additional slammer trays to keep up with the inmate population.

2. Dates on Food

Food is not dated when received from the warehouse.

This issue makes it difficult to use the first-in, first-out method of inventory control.

DOM, Section 22030.11.6, states in part: "...all materials in inventory shall be dated at the time of receipt. Items that carry an assigned shelf life require shelf rotation; first-in, first-out warehousing shall be used with these items...."

Recommendation

Ensure food is dated when received from the warehouse.

3. Serving Trays

Serving trays are not properly stacked to facilitate adequate drying. This was noted in all facilities inspected. Trays are double stacked and wet trays are towel dried.

This condition results in the development of bacteria, odors, and unnecessary administrative labor costs to handle inmate appeals.

H&SC, Section 114105, states in part: "After cleaning and sanitizing, equipment and utensils shall be air dried or used after adequate draining before contact with food and shall not be cloth dried, except that utensils that have been air dried may be polished with cloths that are maintained clean and dry."

Recommendation

Ensure that clean serving trays are organized in a manner that will allow adequate air drying and purchase extra "Tray Drying Racks" to meet the needs of the inmate population.

III. INTERNAL CONTROL

A. Personnel Transactions

1. Custody Timekeeper

The physical organization of the Personnel Office and the location of the Timekeeper may result in inefficiencies and difficulty monitoring transactions. Additionally, there is one timekeeper who has not received training and works in a different location from the Personnel Office.

This condition makes it difficult to prioritize and monitor transactions, avoid the possibility of manipulation, and increases workload,

SAM, Section 20050, states in part: “The Institute of Internal Auditors defines internal control as a process designed to provide an organization reasonable assurance regarding achievement of the following primary objectives: The economical and efficient use of resources....”

Recommendation

Review the physical organization of the Personnel Office.

2. Hiring Documents

Hiring documents are maintained in a location outside of the Personnel Office (i.e. connex box).

This condition results in difficulty reviewing current hires in the event there may be a compliant or accessing documents maintained in the hiring file (i.e., questions, selection information, certification list, applications, etc).

SAM, Section 1602, Statutory Authority, states: “. . . a records management program which will apply efficient and economical management methods to the creation, utilization, maintenance, retention, preservation, and disposal of state records.”

The Records Retention Schedule, Std. 73, lists each document under Title and Description of Records, and its disposition under Remarks.

Recommendation

Review the location of current hiring documents to determine whether there would be efficiencies gained if they are maintained within the personnel office instead of the connex box.

C. Inmate Trust Accounting

1. Obsolete Checks

There are 1,000 old and obsolete checks maintained in the accounting office that have not been destroyed.

This condition may result in late detection of missing State funds.

SAM, Section 1750 states in part: "Each agency is responsible for the appropriate disposal of unused (blank) accountable forms. Accountable forms are unused pre-numbered forms used to record or transfer money. Examples are checks, receipts, meal tickets, and licenses...."

Recommendation

Follow the procedures for destruction of obsolete checks.

2. Reconciliations

Parole Release Fund Reconciliations were not signed by the preparer or reviewer on a consistent basis. A 6 month period was sampled, 5 were not signed by the preparer and 18 were not signed by the reviewer. Additionally, the reconciliations are missing required fields for the date prepared and reviewed. In addition, the computation of the total amount of currency is not entered.

This condition may result in late detection of errors and/or irregularities.

SAM, Section 7908 states: "All reconciliations will show the preparer's name, reviewer's name, date prepared, and date reviewed."

Recommendation

Ensure that reconciliations are reviewed and signed.

D. Materials Management/Warehousing

1. Physical Inventory of Property

A physical inventory of property was started in August 2007; however, the adjustment and reconciliation of records were never completed. In addition, a report identifying missing property has not been generated nor provided to management for review.

This condition may result in late detection of errors, irregularities, theft, misappropriation, and/or missing funds.

DOM, Section 22030.12.6, Physical Inventory of Property, states in part: “The Department shall conduct a physical inventory on all property and reconcile the inventory with accounting records at least every three years. . . Adjustments and reconciliation of the records shall take place after the physical count has been completed. . . .”

Recommendation

Conduct a physical inventory of property, reconcile and make adjustments.

2. Property Identification Numbers

The location of physical property does not reconcile to the Property Control System. In addition, there is equipment that is improperly tagged (i.e., illegible, missing, or blank tags).

This condition may result in late detection of errors, irregularities, theft, and/or misappropriation.

DOM, Section 22030.12.3, Property Identification Numbers, states in part: “Each item of state-owned property shall bear an identifying number, either by decal or graving. . . Property numbers are assigned to property as it is received. When the property is received from the vendor and prior to moving the item from the point of delivery, the property controller shall assign a property tag that indicates the division or unit to which the property belongs and a specific number that shall be affixed to the item. . . If the property tag is destroyed, lost, or marred beyond recognition, a substitute number shall be supplied upon request. . . .”

Recommendation

Ensure that property is tagged in accordance with DOM.

E. Procurement

Duty statements are missing and/or not signed for 5 of the 27 employees sampled in the Procurement Office.

This issue results in difficulty determining the duties and responsibilities of staff.

SAM, Section 20050, states in part: “Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system . . . 2. Line of organizational authority and responsibility are not clearly articulated or are nonexistent. . . .”

Recommendation

Reconcile duty statements to the organizational chart, review for accuracy, and update.

IV. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel Transactions

1. IWSP

The Audits Branch reviewed the CDC 998-As of 27 employees receiving IWSP. Three employees received IWSP for a month. However, they were not entitled to IWSP because the employee did not supervise inmates for a total of 173 hours due to absences. One employee was on Family Medical Leave Act for an entire pay period, and another was off on sick leave for an entire pay period.

These issues result in inaccurate recordkeeping for the inmates and overpayment to the employee.

DPA, Pay Differential 67, IWSP Differential – Units 01, 04, 15, 19 and Excluded Employees, revised July 8, 2008, states in part: “A – Employees having regular, direct responsibility for work supervision, on-the-job training, and work performance evaluation of at least two inmates, wards, or resident workers who substantially replace civil service employees for a total of at least 173 hours per pay period”

Recommendation

Process the appropriate documentation for those employees that were identified in the audit. Also, establish a procedure that ensures payments of IWSP are made only when the applicable criteria is met and monitor the process for compliance.

2. CLAS

The CLAS does not reflect accurate time used. For example, when an employee does not have sufficient leave balances and is docked, the dock is not recorded on the CLAS. In addition, PPAS does not reflect the changes made to leave credits when an employee opts to use leave credits instead of dock.

This issue results in late detection of inappropriate use of leave and inaccurate attendance records.

AB 04-01, Attendance Record Policy, BU 06, and Aligned Non-Represented Employees, states in part: “The Department of Personnel Administration (DPA) Rules, Sections 599.665 and 599.702, Government Code, Section 19849, and the Fair Labor Standards Act (FLSA), Chapter VI, requires all departments to maintain complete and accurate time and attendance records for each employee covered by the FLSA. CDC’s policy establishes a process and time frame for submitting time and attendance record to the Personnel Office to meet mandates requirements.”

Recommendation

Establish a review and monitoring process. Provide both formal and informal training, as necessary. Correct leave records to reflect accurate attendance records and monitor the process for compliance.

3. Certification of Payroll Documents (Prior Finding)

Payroll documents are not certified (signed and dated) by transactions staff. For example, the Form 672, Std 603, and Miscellaneous Payroll/Leave Actions (Std. 671) are not certified. In addition, a pencil and white out is used on the payroll documents.

This issue could result in manipulation of time paid and late detection of errors or irregularities.

PPM, Form Completion, A 012, states: "Following are general instructions that apply to the completion of all payroll related forms. 1. All documents must be typed or printed in ink. 2. All documents must have an authorized signature (see Section I 500)."

Recommendation

Provide training to Personnel Specialists regarding the State Controller's procedure for completing forms and monitor the process for compliance.

B. Classification and Pay

1. Hiring Interview Packages

Deficiencies were noted on three hiring interview packages reviewed; one package for a correctional sergeant was missing the completed interview packages. All three packages lacked a clear scoring process. Several packages were missing interviewer signatures, overall ratings and marks allotted for competitiveness. Many of the questions appeared very difficult to score the answer.

These conditions result in difficulty justifying the selection, if the complaint were to go before the State Personnel Board.

CDCR Memorandum dated April 4, 2003, Hiring Process, states in part: "Job-related interview questions should be developed with specific rating criteria for all hiring interviews. The questions should have a direct correlation to the tasks as detailed in the duty statement and the required knowledge's, skills, and abilities of the classification. Every candidate interviewed should be asked the same core set of questions and panel members should take notes and use the rating criteria to score responses to the questions...If the rationale for the selection is not self-evident based upon the documentation from the interviews...additional

documentation should be completed to justify the selection. The written documentation and rationale for the decisions are important in case the selection is challenged...Sound personnel management practice dictates that a competitive process should be used for all hires....”

Recommendation

Ensure that the completed hiring interview packages contain a copy of the Job Opportunity Bulletin, any other recruitment information, all applications received, screening criteria, interview questions, rating criteria, panel members’ notes, and hiring justification, or notes. All packages must be reviewed for completeness and signatures at the conclusion of the interviews.

2. Position Actions Missing 647s

During the review of the CDC 647 process, it was found that VSPW is not submitting CDC 647 packages for position actions. The acting Institutional Personnel Officer II stated that VSPW does not complete a CDC 647 when moving staff from one position to another via A01C, A02C or 120 transactions. The documentation given to the specialist to initiate the transaction is a memorandum or an email.

This condition results in improper appointment documentation, possible circumvention of the process; late detection of errors, irregularities, and/or misappropriation.

OPS’s PSOM, Section 204, Hiring Process, states in part: Adult and Juvenile Institutions: “. . . the following outlines the procedure for Adult and Juvenile Institution supervisors and manger when filling a vacant position, reclassifying or redirecting a position, establishing or abolishing a position, and when hiring an employee as temporary help...A completed Request for Personnel Action (CDC 647) must be submitted by the hiring program in order to initiate any position action. When a CDC 647 is received in the Institutional Personnel Office for an adult institution personnel staff are responsible for the following: review and approve CDC 647’s for all position actions except for those requiring headquarters review. See Headquarters Classification Review (HCR) list. For the specific classes listed on the HCR list, submit a STD. 625 package to the Office of Personnel Services....”

Recommendation

Ensure that the CDC 647 is used to initiate position transactions (filling/amending, reclassing, changing time base/tenure or redirecting positions, changes to serial numbers) and monitor the process for compliance.

3. Appointments

Deficiencies are noted on 20 CDC 647s reviewed for completeness (i.e., duty statement; organizational chart; certificates; proper pre-employment clearances such as TB tests, I-9, Std. 910 - Essential Job Functions, and/or medical, interview packages certification lists, appointment documents, etc.). LT appointments do not have justification attached or in the comment section of the CDC 647. Justification needed for placing one employee in the blanket is missing.

Four appointments were made to classifications without the required approval from OPS (e.g., submission of the Std. 625). Position numbers were missing on most organizational charts. The incorrect origination charts were attached to several requests (i.e., not showing reporting relationship, not showing the position of appointment). One employee returning to CDCR did not submit a TB evaluation. One duty statement did not have duties that equal 100 percent. Background clearances for Case Records were not reflected on the CDC 647; however, upon review it was found that the clearances were done in a timely manner.

This condition could result in list circumvention; excessive budget expenditures, approval of misallocated positions, and an employee could have been infected with TB and allowed into the facility.

OPS's PSOM, Sections 200–210. 201, Hiring Process: Hiring Process Overview, Pre-employment Clearances, states: "Mandatory pre-employment requirements exist for all new CDCR hires such as TB testing, Essential Functions Health Questionnaire, medical clearance, background investigation and citizenship status. These requirements must be satisfied prior to the appointment date..."

OPS's PSOM, Section 204, Hiring Process: Adult and Juvenile Institutions, Request for Personnel Action, states: "When a 647 is received in the Institutional Personnel Office for an adult institution...personnel staff are responsible for the following: review and approve 647's for all position actions except for those requiring headquarters review. See Headquarters Classification Review (HCR) list. For the specific classes listed on the HCR list, submit a Std. 625 package to the Office of Personnel Services...."

SPB's PMPPM, Section 331, states: "Prescribes the basic standards for making limited-term appointment of one year, and prescribes exceptions under which the board may authorize limited term appointments up to a total of two years' duration. State Personnel Board Policy: As specified by Government Code Section 19080.3, it is the policy of the State Personnel Board (SPB) that limited-term appointments are to be used only for limited-duration staffing needs. Such appointments must not be used to fill positions on an ongoing basis, since that circumvents consideration of those who are eligible for an interest in permanent jobs."

Personnel Management Standards, Duration and Extension, states in part: “The standard maximum duration for limited-term appointment is one year. However, such appointments may be extended for periods up to two years...When an appointment to a position is made for less than the maximum period specified above, it may be extended to a total duration of up to two years when a department can fully justify their conclusion that use of a permanent appointment would lead to a need for layoff, demotion or mandatory transfer...and extend them to two years when the statutory requirements clearly have been met. Documentation must be retained for post-audit purposes.”

Recommendation

Ensure that the proper documentation/justification is provided by the Program Supervisors to the Personnel Office for LT appointments. Submit proper documentation to the OPS. Ensure that all new and returning employees submit a TB evaluation. Ensure that any employee placed into the blanket is clearly documented and justified and monitor the processes for compliance.

4. OOC Assignments

Twenty assignments were randomly selected for review. Organizational charts, OOC checklist and the memorandum to the employee assigning the OOC, were attached to all assignments. However, the completion memorandums were not on file. Of the 19 assignments reviewed, 5 extensions were not sent to OPS for review as required. Recruitment efforts were not documented for original or extensions for OOC assignments when the incumbent is out on temporary bases.

This condition could result in the revoking of delegation by DPA.

DPA, Section 375, Guide to Classification and Pay, states in part: “OOC assignments should only be used as a “last resort” to accommodate temporary staffing needs. All civil service alternatives should be explored first before using OOC assignments. Specifically, managers and supervisors should examine the feasibility of using the following alternatives any time an OOC assignment is being considered:

- Limited-term appointment
- Temporary reassignment of work to appropriately classified positions
- Rotating assignments
- Training and development assignments
- Acting assignments under the State Personnel Board (SPB) Rule 302.3 (compensable up to 60 workdays)

NOTE: SPB Rule 302.3 should not be used when the acting assignment can reasonably meet the OOC provisions in a current MOU agreement or in the DPA Rule 599.810. In addition, SPB Rule 302.3, pertaining to acting assignments, should not be used in sequence with MOU or DPA Rule 599.810 (see section 4)....”

OPS's PSOM, states: "Completion Notice:

- A copy of page 1 (only) of the most recent OOC Checklist/Approval form submitted for the employee.
- The box "Notification of completion of assignment" must be checked.
- The "Actual last date of OOC" and Actual number of calendar days" information must be entered.

The Notification of Completion of OOC must be submitted to the local personnel office AS SOON AS THE ASSIGNMENT IS TERMINATED OR THE ACTUAL LAST DATE OF OOC IS KNOWN. This document will alert the personnel staff to discontinue payment of OOC as of the date indicated...."

Enhanced delegation memorandum dated October 27, 2006: VSPW was not provided enhanced delegation. Therefore, they must submit all extensions beyond 60 days to the OPS for review and approval.

Recommendation

Ensure that all extensions are sent to OPS for review and approval. Recruitments efforts should be made for temporary vacancies and must be documented on all OOC packages (including dates and details). Monitor the process for compliance.

C. Plant Operations

1. Cross-Connection Program

The Audits Branch noted the following deficiencies regarding the cross-connection program (i.e., backflow):

- The master list that identifies the location, serial numbers, manufacturer, and the number of backflow devices, that are to be tested annually, does not reconcile with SAPMS data.
- The Audits Branch could not determine or validate how many backflow devices are located throughout the facility.
- There is no published cross-connection schedule for 2009.

This issue results in difficulty determining whether backflow tests have been performed.

The CPC, Section 603.3.2, states in part: "The premise owner or responsible party shall have the backflow prevention assembly tested by a certified backflow assembly tester at the time of installation, repair, or relocation and at least on an annual schedule thereafter or more often when required."

SAPMS guidelines, states: "Establish an effective and efficient (PM) procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment."

DHS, Drinking Water and Environmental Management Division recommends that test results be kept on file in a central location.

Recommendation

Create a master list or use plot plans to identify all locations and devices, maintain accurate data within the SAPMS database and test backflows on an annual basis. Continuous education of staff should be encouraged.

2. Emergency Generators

Emergency generator record keeping is inadequate. The following deficiencies are related to the testing and maintenance of the emergency generators:

- There are no local operating procedures establishing standardized procedures and/or direction for the testing and maintenance of emergency generators.
- The NFPA standards are not adhered to regarding monthly testing.
- Record keeping is not maintained.
- The asset history report for Lethal Electrified Fence (LEF) emergency generator number 390000001788 contains information not related to testing and maintenance which makes reconciling difficult.
- The Main Site generator and LEF generator logs are not certified with a signature or initials by the tester.
- A standardized log is not used for each area.

These issues make it difficult to determine and validate that emergency generators are properly maintained and tested timely.

NFPA, Emergency Power Stand-by Systems (EPSS) 110, Appendix-5-11.5, states in part: "Battery racks should be capable of withstanding seismic forces in any direction...Level I EPSS including all appurtenant components shall be inspected weekly and shall be exercised under loads at intervals not more than 30 days...At least once monthly for a minimum of thirty minutes."

Institutions Maintenance Unit (IMU) memorandum, Emergency Power Generator Systems dated December 21, 1999, directs institutions to conduct load bank tests on emergency generators and recommends that the Institution incorporate all assets and tasks into the SAPMS.

Notice of Change to DOM (NCDOM) transmittal letter 00-01, states: "Each institution/facility and parole region shall independently implement local procedures in accordance with all applicable laws and regulations governing those policies and procedures which are not covered by an approved DOM article."

Recommendation

Comply with the CDCR, IMU guidelines and incorporate all tasks related to Emergency Generators into the Facility Center database. Additionally, adhere to the conditions to operate by the permitting county and the NCDOM by implementing local procedures. Lastly, initiate and maintain records in accordance to the NFPA.

3. Preventive Maintenance

The Audits Branch noted that the methods of a PM program were not adhered to for equipment located in the Food Services department. For example:

- There are no PM procedures that have been approved by the Associate Warden, Business Services and the Warden.
- Asset history reports were not requested or reviewed by supervisors.
- Of the 37 assets sampled, 4 assets were not maintained or scheduled for PM.
- Equipment/assets were not always clearly identified with the standard equipment code on each piece of equipment (SAMPS tags). Thirteen percent of assets tested were not tagged with maintenance identifiers.
- Asset number 390000002834 (Freezer) has inadequate maintenance. The freezer may contaminate food (chemically, biologically and mechanically). There is a major ice build up on the floors, doors, walls, condensers, fans, and motors. Additionally, this issue could cause serious injuries from slips, trips, and falls.

This condition may render the PM program ineffective, decrease efficiency, increase downtime, and result in additional cost of repairs.

CCR, Title 15, Subchapter 5, Article 1, Section 3380, states in part: "Subject to the approval of the Wardens, Superintendents and parole Region Administrators will establish such operational plans and procedures as are required for implementation of regulations and as may otherwise be required for their respective operations. . . Such procedures will apply only to the inmates, parolees, and personnel under the administrator."

SAPMS guidelines, states in part: "Establish an effective and efficient PM procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment...Without such program equipment will wear out prematurely, structures will deteriorate, and efficient function of the facility will be compromised."

DPOMPM, states in part: "The CPM shall complete a review, at least monthly...."

CRFC, Section 114175, states: "Equipment and utensils shall be kept clean, fully operative, and in good repair."

Recommendation

Adhere to the methods of a PM program. Ensure supervisors request and review asset history reports and monitor the process for compliance.

4. CDCR 1697

The CDCR 1697 is not properly maintained. The Audits Branch reviewed inmate time records at the plant operations office, maintenance mechanics, carpenters, engineers, and ground-keepers shops and noted the following deficiencies:

- Reasons for using Exceptional Time, Excused (E), Absent (A), and Security(S) are not documented.
- Transferred in and daily movement sheet numbers are missing.
- Inmates are allowed to use sick time without documentation.
- Hours of assignment are not documented on the CDCR 1697.
- Timekeepers are using initials instead of a signature to certify time.
- Duty statements are missing and/or not signed by staff and/or inmates.
- "A" time (absent from assignment) is given without issuing disciplinary documentation.
- Inmates are not signed in/out on a daily basis. In one instance, the inmate time keeping was not maintained for three days.
- The CDCR 1697 is completed in pencil instead of ink.
- The hours of assignment on the inmate duty statement does not reconcile with the CDCR 1697.

This issue results in inaccurate documentation of inmate work time.

CCR, Title 15, Section 3045, Timekeeping and Reporting, states: "(a) Inmate timekeeping logs. Attendance of each inmate assigned to a credit qualifying assignment shall be recorded daily on an approved timekeeping log."

Recommendation

Complete the CDCR 1697 as events occur. Maintain Inmate Work Training Incentive Program (IWTIP) documents in accordance with IWTIP guidelines and the CCR, Title 15.

D. Food Services

CDCR 1697s are not completed thoroughly and appropriately by Custody Staff at the A Yard and B Yard Satellite Kitchens. For example, initials are used instead of signatures, exceptional time is not always explained, the top portion of the CDCR 1697 is not completed, and entire days are not completed.

This issue could result in overpayment of inmate time worked and inaccurate information reported regarding the inmates time.

CCR, Title 15, Section 3045, Timekeeping and Reporting, states part: “(a) Inmate timekeeping logs. The attendance of each inmate assigned to a credit qualifying assignment shall be recorded daily on an approved timekeeping log. If the assignment began or ended during the reporting month, the date(s) of such activity shall be recorded on the timekeeping log. Only the symbols designated on the timekeeping log shall be used to document the inmate’s attendance. The symbol(s) and applicable hours for each day shall be recorded in the space corresponding to the calendar day . . . shall be retained at a secure location...for a period of four years from the date of completion. (1) Staff shall record the work or training time and absences of each inmate assigned to their supervision each day as they occur....”

Recommendation

Complete the CDCR 1697 as events occur. Maintain IWTIP documents in accordance with the CCR, Title 15.

V. POLICIES AND PROCEDURES

There are no local operating procedures governing the work of the contracted pest control technician. As a result, staff and inmates are not notified 48 hours in advance of chemical application.

Late notification to staff and inmates regarding the potential hazards associated with applying pesticides could result in an increased threat to life, health, and safety.

BU 1 Agreement, states: “Whenever a department utilizes a pest control chemical in State owned or managed buildings/grounds, the department will provide at least 48 hours notice prior to application of the chemical....”

CCR, Title 15, Subchapter 5 Article 1, Section 3380, states: “Subject to the approval of the Wardens, Superintendents and parole Region Administrators will establish such operational plans and procedures as are required for implementation of regulations and as may otherwise be required for their respective operations Such procedures will apply only to the inmates, parolees, and personnel under the administrator.”

NCDOM 00-01, states: “If no local procedures exist, omit the reference to local procedures. Each institution/facility and parole region shall independently implement local procedures in accordance with all applicable laws and regulations governing those policies and procedures which are not covered by an approved DOM article.”

Recommendation

Establish a local operating procedure related to pest/vector control to comply with the CCR, Title 15 and the NCDOM 00-01. Notify staff and inmates of applications of pesticides to comply with the Bargaining Unit 1 agreement, Section 10.28.

VI. PENALTIES AND FINES

Lump sum payments for separations are not issued within 72 hours. Of the 12 lump sum payments reviewed, 5 were not issued within 72 hours.

This condition could result in severe penalties and prosecution. Also, the Institution could be held liable for treble damages.

CDCR Memorandum, dated May 4, 2001, Changes to California Labor Code Section 220, states in part: “. . . requires an employer (including State agencies) to provide permanently separating employees with all final pay due (including overtime and lump sum payments) on the effective date of separation if the employee notified the employer at least 72 hours prior to separation. When an employee permanently separates without providing at least 72 hours prior notification, the employer then has 72 hours from the time the employee provides the notification to give him/her all final pay due.”

Recommendation

Establish a procedure, which ensures that lump sum payments are issued timely. Also, ensure that supervisors adequately monitor the process for compliance.

VII. FOLLOW-UP TO THE APRIL 2008 FOOD FACILITY INSPECTION PERFORMED BY THE ORM

As of January 15, 2009, six deficiencies, relating to the Central and Satellite Kitchens, have been resolved. The Central Kitchen's blast chiller rack rotator needs repair because the racks are not rotating.

Consequently, it takes longer to chill the food than what is noted in the design specification.

CRFC, Section 114175, states: “Equipment and utensils shall be kept clean, fully operative, and in good repair.”

Recommendation

Generate a work order to repair the blast chiller rack rotator.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

VALLEY STATE PRISON FOR WOMEN

GLOSSARY

918 blanket	Salary and Wage/Other
AB	Administrative Bulletin
AR	Accounts Receivable
ASD	Accumulation Start Date
BBP	Blood Borne Pathogens
BU	Bargaining Unit
CAP	Corrective Action Plan
CCR	California Code of Regulations
CDC 647	Personnel Action/Request for Admission
CDC 998-A	Employee Attendance Record
CDC 1697	Inmate Work Supervisor's Time Log
CDCR	California Department of Corrections and Rehabilitation
CFC	California Food Code
CLAS	California Leave Accounting System
CO	Correctional Officer
CPC	California Plumbing Code
CRFC	California Retail Food Code
DCHCS	Division of Correctional Health Care Services
DHS	Department of Health Services
DOM	Department Operations Manual
DMS	Daily Movement Sheet
DPA	Department of Personnel Administration
DPOMPM	Departmental Plant Operations Maintenance Procedures Manual
ECC	Exposure Control Committee
ECF	Exposure Control Facilitator
ECP	Exposure Control Plan
EPSS	Emergency Power Stand-by System
FIFO	First in First Out
FLSA	Fair Labor Standards Act
FORM 672	Time and Attendance Report
HCP	Hazard Communication Program
HCR	Headquarters Classification Review
H&SC	Health and Safety Code
HWCA	Hazardous Waste California
IIPP	Injury and Illness Prevention Plan
IMU	Institutions Maintenance Unit
IWTIP	Inmate Work Training Incentive Program
IWSP	Institutional Worker Supervisor Pay
LEF	Lethal Electrified Fence
LT	Limited Term

MSDS	Materials Safety Data Sheet
NCDOM	Notice of Change to Department Operations Manual
NFPA	National Fire Protection Association
OAC	Office of Audits and Compliance
OOC	Out of Class
OPS	Office of Personnel Services
ORM	Office of Risk Management
PHS	Public Health Section
PM	Preventive Maintenance
PMPPM	Personnel Management Policy and Procedures Manual
PPAS	Personnel Post Assignment Systems
PPE	Personal Protective Equipment
PPC	Periodic Position Control
PPM	Payroll Procedure Manual
PSOM	Personnel Services Operations Manual
SAM	State Administrative Manual
SAPMS	Standard Automated Preventive Maintenance System
SCO	State Controllers Office
SJCAPCD	San Joaquin Valley Air Pollution Control District
SPB	State Personnel Board
Std. 603	Absences Without Pay Report
Std. 607	Change in Established Position
Std. 625	Request for Certification
Std. 647	Personnel Action/Request for Admission
Std. 671	Miscellaneous Payroll/Leave Actions
TB	Tuberculosis
VSPW	Valley State Prison for Women

SAMPLE FORMAT CORRECTIVE ACTION PLAN

Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed
A.1	<p>WRITTEN NOTICE</p> <p>Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.</p>	<p>Facility Captain Do Not use individuals names and do Not use Acronyms.)</p>	<p>A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed.</p> <p>B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense</p>	2/2/2006

California Department of Corrections and Rehabilitation
Office of Audits and Compliance
Information Security Branch.



Information Security Compliance Review
Valley State Prison for Women
January 12-16, 2009

INFORMATION SECURITY OFFICER
Allen J. Pugnier

AUDITORS
Allen Pugnier
Prince Donaldson

**Information Security Compliance Review
Valley State Prison for Women
January 12-16, 2009**

The Office of Audits and Compliance (OAC), Information Security Branch (ISB), conducted an Information Security Compliance Review of Valley State Prison for Women (VSPW) between January 12, 2009 and January 16, 2009. The review covered 18 different areas. VSPW was compliant in 13 areas, partially compliant in 5 areas. The overall score for the institution is 94%. The chart below summarizes these outcomes.

FINDINGS SUMMARY:

		Score	Compliant	Partial Compliance	Non Compliant
STAFF COMPUTING ENVIRONMENT					
1.	Use Agreement (Form 1857) is on file.	98%	C		
2.	Annual Self-Certification of Information Security Awareness and Confidentiality forms are on file.	79%		P	
3.	Information security training is current.	89%		P	
4.	Staff can log on using own password.	100%	C		
5.	Network access authorization is on file.	97%	C		
6.	Physical locations of CPUs agree to inventory records.	100%	C		
7.	Staff CPUs labeled "No Inmate Access."	100%	C		
8.	Staff monitors are not visible to inmates.	100%	C		
9.	Anti virus updates are current.	86%		P	
10.	Security patches are current.	80%		P	

INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)					
11.	Physical location of CPUs agree to inventory records	100%	C		
12.	CPU labeled as inmate computer.	100%	C		
13.	Anti virus updates are current.	71%		P	
14.	Inmate monitors are visible to supervisor.	100%	C		
15.	Portable media is controlled.	100%	C		
16.	Telecommunications access is restricted.	100%	C		
17.	Operating system access is restricted.	95%	C		
18.	Printer access is restricted.	100%	C		

Total of Tests	13	5	0
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Overall Percentage 94%

**Information Security Compliance Review
Valley State Prison for Women
January 12-16, 2009**

OBJECTIVES, SCOPE AND METHODOLOGY

The objectives of the Information Security Compliance Review were to:

- Assess compliance to selected information security requirements,
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department, and
- Provide information security training for management and staff.

The Information Security Branch (ISB) did not review any Prison Industry Authority computers.

In conducting the fieldwork the ISB performed the following procedures:

- Interviewed senior management, information technology staff, institutional staff, and computer users.
- Asked staff to provide evidence that all authorized computer users had Acceptable Use Agreement forms and appropriate training support documentation on file.
- Tested selected information security attributes of users and IT equipment using three different population samples. This included both the staff and inmate computing environments.
- Reviewed various laws, policies and procedures, and other criteria related to information security in the custody environment.
- Conducted physical inspection of selected computers.
- Observed the activities of the information technology support staff.
- Analyzed the information gathered through the above processes and formulated conclusions.

FINDINGS AND RECOMMENDATIONS

The ISB provided a copy of our review guide to your IT staff. It contains criteria and detailed methodology. That information, therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed below. ISB staff discussed them with management in an exit conference following our fieldwork. Please contact us if you would like to discuss further any of these issues.

**Information Security Compliance Review
Valley State Prison for Women
January 12-16, 2009**

- 1. Self-certification of annual information security awareness and confidentiality is not on file for all computer users. (79% compliance)**

Recommendation: Require all computer users to self-certify their information security awareness and confidentiality agreement on an annual basis using form CDCR ISO-3025 or equivalent.
(DOM 49020.10.1)

- 2. Information security training is not current for all computer users including both staff and contractors. (89% compliance)**

Recommendation: Review information security training procedures and training records maintenance. Require that all computer users receive annual information security training. Require appropriate documentation of the training. (DOM 49020.14.1, 41030.1)

Best Practices: The information security awareness training material is located on the CDCR intranet on the ISO's web page.

- 3. All Staff computers do not have up-to-date antivirus software. (86% compliance).**

Recommendation: Update antivirus software on all staff computers.
(DOM 48010.9)

- 4. All Staff computers do not have up-to-date security patches. (80% compliance).**

Recommendation: Update security patches on all staff computers.
(DOM 48010.9)

- 5. All Inmate accessed computers did not have up-to-date antivirus software. (71% compliance)**

Recommendation: Update antivirus software on all inmate computers.
(DOM 48010.9)

**Information Security Compliance Review
Valley State Prison for Women
January 12-16, 2009**

OTHER OBSERVATIONS:

Observation 1: Critical data in some areas is not being backed up.

Recommendation: Each department manager should identify all data that is critical to their operations, including locally developed databases, and develop back-up and restoration procedures. A back up schedule should be established and enforced. (DOM 48010.9.3)

Observation 2: It is not clear who the Information Security Coordinator (ISC) is.

Recommendation: Notify the ISC, in writing of the assignment, and maintain a historical record of all ISC appointees. (DOM 49020.6)

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

EDUCATION
COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

MAY 19 – 23, 2008



CONDUCTED BY

EDUCATIONAL COMPLIANCE BRANCH

EXECUTIVE SUMMARY

OFFICE OF AUDITS AND COMPLIANCE

EDUCATION COMPLIANCE BRANCH REVIEW

Valley State Prison for Women

May 19-23, 2008

TEAM MEMBERS:

*Raul Romero, Assistant Chief, OAC/ECB
Beverly Penland, Vocational Vice-Principal, OAC/ECB
John Jackson, Academic Vice-Principal, OAC/ECB
John Delapp, Academic Vice-Principal, CSP-SOL
Zachary Steinhaus, Vocational Vice-Principal, CEN
Christine Long, Principal Librarian (RA), OCE
Tom Posey, Academic Vice-Principal, OCE-IYO
Ron Callison, Vocational Vice-Principal, OCE-VTEA
Mark Lechich, Academic Vice-Principal, OCE-WIA*

291 Areas Reviewed

CATEGORIES	PERCENTAGE OF COMPLIANCE
Education Administration	60 ÷ 71 = 85%
Academic Education	43 ÷ 70 = 61%
Vocational Education	34 ÷ 42 = 81%
Library/Law Library	20 ÷ 29 = 69%
Federal Programs	74 ÷ 79 = 94%
Special Programs*	N/A %
Total:	231 ÷ 291 = 79%

Your corrective action plan (CAP) must address each of the deficiencies listed below. The CAP must be submitted to the Superintendent of the Office of Correctional Education (OCE) for review and/or modification. The CAP then is due to the Office of Audits and Compliance (OAC) for review within 30 days after your receipt of the preliminary report from OAC.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ADMINISTRATION SECTION

I. EDUCATION ADMINISTRATION: 85% COMPLIANCE

Deficiency:

#6 *Are law library purchases funded by the institution's general budget?* There is an ongoing attempt by the California Department of Corrections and Rehabilitation (CDCR) Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.

#8 *Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?* The EMR and the EDR is not accurate. There are several areas that are in need of improvement. It is recommended that the VSPW Education Department work with OCE to correct errors.

#16 *Are all staff appropriately working and/or assigned within the education program?* There are two teachers coordinating almost entirely college programs contrary to OCE policy and general funding for Adult Basic Education requirements. While it is understood that college programs are a beneficial and sequential part of the education process, no funds for staff or college materials are included in the general funds by CDCR. It is recommended that OCE and the Warden support and encourage the funding of Post Secondary Coordinator positions for each institution to handle distance college and trade school participation. There are also two teachers assigned to handle the education testing process that are not identified by OCE as approved positions for that specific purpose. It is recommended that VSPW Education Department and the Warden work with OCE to clarify these assignments.

#27 *Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association (CCPOA) agreement and the institutional Operational Procedure?* The education and work program model is not in place as agreed upon on the approved signed Alternative Education Delivery Model CCPOA agreement.

#30 *Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?* The college distance education programs models are not approved.

#31 *Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted?* The Alternative Education Delivery Model staff are providing excellent programming for inmates. However it is not clear from the EMR or other available records that the each of the models required to serve 120 enrolled inmates are meeting such a requirement. It is recommended that the Principal work with OCE to clarify this issue.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ADMINISTRATION SECTION

#46 Do academic, vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)? **The EMR and other available enrollment/participation rosters for the distance education and independent models did not provide sufficient evidence to confirm quotas.**

#47 Has the Institution developed an eligibility list for assigning inmates to the Bridging Program? **A specific Bridging Education Program eligibility list could not be obtained. It is most likely that there is a list but none has been made available to the Education Department to date. Further follow up is recommended to confirm such as list is available.**

#58 Do all of the quarterly CDCR Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? **A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerks assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on the OCE memo addressing the Education Files processing.**

#59 Are Education Files with a copy of the Record of Inmate Achievement (CDCR Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is the original copy of the Record of Inmate Achievement (CDCR Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the RC and transferred to the GP receiving institution? **A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerks' assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on the OCE memo addressing the Education Files processing.**

#61 Are literacy programs available to at least 60 percent of the eligible prison population? **It was not possible to establish the factual percentage since the EMR indicates 103 percent and the inmate eligible count appears lower that it may be. In addition, there is only one TV broadcast channel, no TV Specialist available to date and the activation and availability could not be confirmed. However, the VSPW Education Department is commended for having over 40 inmate tutors. It is recommended that the VSPW Education Department work with OCE to clarify exactly what percentage of the eligible population is being served.**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ACADEMIC EDUCATION SECTION

II. ACADEMIC EDUCATION: 61% COMPLIANCE

Deficiency:

#2 Do all the of classroom files reflect the Test of Adult Basic Education (TABE) scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the CDCR Literacy Plan criteria and OCE TABE testing requirements? The Pre-Release and W-CALM classes do not administer the TABE.

#3 Are all of the CDCR Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure? 128B chronological reports are issued instead of the 128E chronological reports required by policy. Several inmate clerk time cards (CDCR 1697s) were not started or completed.

#4 Is 100 percent of the CDCR curriculum recording system in-use, accurate, and current? Some classes use an in-house recording system and not the CDCR/OCE competencies recording system.

#8 Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript? The high school classes are the only ones issuing required and elective credits. The other classes do not issue required or elective credits.

#19 Is a master inventory of TABE test booklets and answer sheets maintained by the testing coordinator? Unable to verify the existence of a master comprehensive computerized inventory. There is no inventory of the answer sheets. The TABE Coordinator needs to include an inventory of answer sheets to the computerized master inventory to account for all test materials including their location and current status

#21 Is the TABE locator being used when needed to determine which level appropriate TABE test to administer? The TABE coordinator indicated they have found that the inmates were memorizing the locator test resulting in inmates being tested in an inappropriate test level. They are now using an interview and an explanation of test level explanation before the inmates are tested and have seen a reduction of testing in the wrong level.

#22 Are teachers testing within 10 days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix? All teachers are not testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not TABE testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ACADEMIC EDUCATION SECTION

#23 Are the TABE tests administered according to the testing matrix? **The TABE tests are not being administered by all teachers according to the testing matrix. The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers**

#24 Is the TABE locator being used when needed to determine which level appropriate TABE test to administer? **The TABE locator test is not being used when needed to determine which level appropriate TABE test to administer**

#25 Are teachers using pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates? **The Pre-Release and W-CALM classes are not using the TABE pre-post subtest diagnostic reports for student needs assessment nor are they reviewing test scores with inmates**

#26 Are teachers using the TABE test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes? **The Pre-Release and Womens Conflict and Anger Lifelong Management (W-CALM) teachers are not using the TABE pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes**

#27 Are current TABE subtests placed in student's file? **In at least one case the current TABE subtests is placed in a separate locked file instead of the student file.**

#28 Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours? **There are no open line schedules for the Distance Learning Alternative Education Delivery Model. The teachers are coordinating and assisting inmates enrolled in primarily California Community College classes within a classroom services center setting.**

#29 Are the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments? **There is no Television Specialist hired to date. The Distance Learning teachers that are coordinating primarily college programs are not using the education channel to deliver courses. However, a teacher is running Transforming Lives Network very successfully.**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ACADEMIC EDUCATION SECTION

#30 Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning Study teacher, utilizing the Transforming Lives Network and airing educational programs such as the Kentucky Educational TV General Education Development series on a weekly basis? **There is no Television Specialist and the Distance Learning teachers running primarily college programs are not using the education channel to deliver courses. However, a teacher is running Transforming Lives Network very successfully including the use of Kentucky Educational Television videos.**

#33 Do all of the Education/Work Program classes have current course outlines and lesson plans that agree with the OCE approved curriculum? **There are no Education/Work Program (half-time) classes.**

#34 Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the OCE approved curriculum? **The Distance Learning classes do not have current course outlines and lesson plans that agree with the OCE approved curriculum Distance Learning because the teachers are primarily coordinating college programs.**

#36 Are teachers testing inmates within 10 days of being enrolled or assigned to Alternative Education Delivery Model program? Are the inmates' TABE subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? **Teachers are not testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model programs (AEDM). AEDM teachers are not TABE testing students. It is recommended that the Comprehensive Adult Student Assessment System (CASAS) testing be required by policy from the OCE for programs such as Alternative Education Delivery Models requiring 120 enrollment, Women's Conflict and Anger Lifelong Management, Bridging Education, Pre-Release, and other short duration or large enrollment programs.**

#37 Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? **No evidence was found that Alternative Education Delivery Model programs rosters are given to the Vice Principal and Principal on at least a weekly basis.**

#38 Are students' gains being recorded and tracked? **The Alternative Education Delivery Model programs requiring 120 enrollments do not have a formal measurement instrument/tool or system in place for all students.**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
ACADEMIC EDUCATION SECTION

#46 Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with confidential document procedure? **The COMPAS teacher indicated it usually takes more than one day to complete the questionnaire. The incomplete questionnaires are locked in the assessment Office Technician's desk till they are completed and the data is entered into the computer. A shredder is located in their work area.**

#54 Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained? **The CDCR/OCE Pre-Release curriculum recording system is not in use. However, there are two in house tracking systems used.**

#57 Are all of CDCR Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment? **The CDCR Form 128E required by the OCE policy to be used to record all education participation, including course completions, is not used. The CDCR Form 128B is used instead of the 128E contrary to OCE policy.**

#64 Are alternate modalities available for use within the housing units for the distant learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.? **Alternate modalities are not available for use within the housing units for the Distance Learning program. Alternate modalities such as, Kentucky Education Television videos, Transforming Lives Network satellite feeds/videos, institutional television, visual worksheets need to be developed and implanted within the housing units.**

#65 Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access? **There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.**

#66 Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty? **There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.**

#67 Are school faculty members given the opportunity to provide input into the broadcast schedule? **A system to give school faculty members the opportunity to provide input into the broadcast schedule has not been put in place.**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
VOCATIONAL EDUCATION SECTION

III. VOCATIONAL EDUCATION: 81% COMPLIANCE

Deficiency:

#3 Are all of the CDCR 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure? One of the program teachers is not completing 128E chronological quarterly reports. Some of the 128 E chronological reports are inaccurate in reporting of the units completed each quarter.

#6 Are elective credits in the designated vocational subject being issued to inmates and recorded on the transcript? Teachers were unaware that elective credits could be issued.

#9 Do all of the vocational education classes have course outlines that agree with the CDCR curriculum? Most of the program teachers do not have course outlines of their programs.

#30 Is the TABE locator being used when needed to determine which level appropriate TABE test to administer? The teachers do not administer the initial test. The TABE coordinator identifies the appropriate post test level.

34 Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the OCE/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.? All of the teachers have not received Gender Responsive Strategies training and do not have course outlines reflecting the Gender Responsive Strategies curriculum.

#35 Do all or more of the vocational classes have current lesson plans that agree with the OCE/Gender Responsive Strategies approved curriculum? Gender Responsive Strategies have not been incorporated into the program lesson plans.

#40 Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly? Some of the vocational programs do not have a Trade Advisory Committee or attend or conduct any Trade Advisory Committee meetings.

#41 Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file? Some programs did not have a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey to share with their students.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
LIBRARY/LAW LIBRARY SECTION

IV. LIBRARY/LAW LIBRARY:

69% COMPLIANCE

Deficiency:

#11 Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them in? The Warehouse notifies the Senior Librarian who picks up the discs and then loads them on to the computers.

#13 Within the entire institution's libraries is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than 5 years? Does the library program have at least three directories relevant to the questions asked by the population served? The encyclopedia is dated 2001, a new one was recently ordered. The unabridged dictionary is a 1993 edition. The Senior Librarian will purchase a new one with Recidivism Reduction Strategies funds. The library has a 2008 Directory of Attorneys, 2006 Headquarters USA, 2006-2007 Washington Info Directory Information directory.

#14 Does each library in the institution have a current world almanac, an atlas that is no more than three (3) years old, an English language dictionary that is no more than five (5) years old, and a Spanish and English dictionary that is no more than ten (10) years old? The Main library has a 2007 World Almanac; the atlases are more than three years old. The libraries maintain dictionaries within age limits.

#16 Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials? The Facility A library collection is lacking adequate titles.

#20 Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? The library uses the Follett automated circulation system. Staff performs circulation duties. Inmates are not allowed to use the circulation computer - institution policy. There is no Interlibrary Loan process in place.

#21 Is there an adequate library book checkout system in place and an adequate overdue system in use? The Advantage Plus update to the circulation system can now only be accessed through the Internet. There is an adequate overdue system.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
LIBRARY/LAW LIBRARY SECTION

#22 Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual? Are all the Law Library Electronic Delivery System computers up-to-date and operating in each library? **The library has begun to receive printed updates but has a break in some editions. They have not received Law Week yet. Bulletin boards are mounted in each library to display revisions.**

#24 Is a procedure for accessing the Circulating Law Library in place? **The library has an agreement with the Madera County Law Library to obtain needed books to photocopy the requested cases.**

#28 Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? **The current law library clerks received training from a previous law clerk that was a trained paralegal. Staff provides initial training in general library processes. Print materials are available on the procedures for book repair**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
FEDERAL GRANT PROGRAMS SECTION

V. FEDERAL PROGRAMS: 94% COMPLIANCE

Workforce Investment Act Program:

Deficiency:

#16 Is there a current Student Job Description on file? The Federal Education Grievance Procedure policy is not included in Student Job Description as required by the Office Of Correctional Education, Federal Grants memo dated June 23, 2006.

#29 Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? This Literacy Learning Lab (LLL) has new computers. PLATO technicians have not been out to open the upgrades. Mr. Culver has tried to make arrangements, but PLATO has not responded

#30 Is your software appropriately maintained by PLATO's technical field staff? The Reading Plus software is not installed. Valley State Prison for Women (VSPW) received the software program in August, 2007.

#36 Are you using the latest version of the TOPSpro Management Information System software? TOPSpro version 4.55 is being used. Two upgrades have been sent out since this version.

COMMENTS ON THE FEDERAL GRANTS SECTION

Workforce Investment Act

Findings:

The Federal Education Grievance Procedure policy is not included in Student Job Description. Memo dated June 23, 2006. A corrective action plan must be submitted to the Federal Grants unit by June 30, 2008.

The Workforce Investment Act (WIA) Equipment Inventory is not current. No WIA tags on computers purchased with WIA funds the in LLL. A Corrective Action Plan must be submitted to the Federal Grants unit by June 30, 2008.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
FEDERAL GRANT PROGRAMS SECTION

The Reading Plus software needs to be installed on the LLL server. The software has been a VSPW since August 2007. Corrective Action Plan must be submitted to the Federal Grants unit by June 30, 2008.

Incarcerated Youth Offender Program:

Findings:

No deficiencies found.

Vocational Technical Education Act Program:

Findings:

#10 The Air Conditioning and Refrigeration Trade Advisory Committee members refused to come into the prison for the required Trade Advisory Committee Quarterly Meetings. The instructor was told that Trade Advisory Committee members had to come in since the Instructor is not allowed top go out to the community.

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
SPECIAL PROGRAMS SECTION

IV. SPECIAL PROGRAMS:	N/A	COMPLIANCE
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OVERALL COMPLIANCE RATING: 79%.

Administrative staff is apprised that the ratings presented are to be considered tentative, and are subject to change pending final review by the Assistant Secretary, Office of Audits and Compliance. Significant changes in ratings will be documented with full explanations and forwarded to the Warden within 15 working days after the conclusion of the Compliance Review.

May 23, 2008

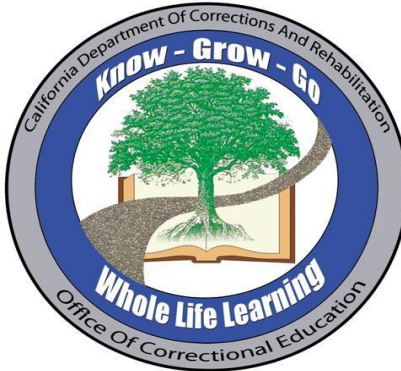
Raul Romero, Assistant Chief

* Denotes Developmental Disabilities Program (Clark Remedial Plan) and Physical Disabilities Program (Armstrong)

DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE

EDUCATIONAL COMPLIANCE BRANCH



COMPLIANCE REVIEW FINDINGS

Valley State Prison for Women

May 19 through 23, 2008

ADMINISTRATION

Raul Romero

ACADEMIC EDUCATION

John Delapp; John Jackson

VOCATIONAL EDUCATION

**Beverly Penland; Ron Callison
Zachary Steinhaus**

LIBRARY

Christine Long

FEDERAL SUPPLEMENTARY PROGRAMS

**Mark Lechich
Ron Callison
Tom Posey**

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

No.	INSTITUTION: Valley State Prison for Women (VSPW) DATE: May 19-23, 2008 COMPLIANCE TEAM: Raul Romero	Yes/No or NA	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Allotments/Operating Expenses:</div> <ul style="list-style-type: none"> Does the Principal maintain a budget tracking system to monitor the school departments' complete budget? Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance? 	Yes	The recent budget allotments that include Recidivism Reduction Strategies funds are being added to the tracking system.
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	Yes	Due to the recent allotment just received and the current California Department Of Corrections And Rehabilitation (CDCR) budget deficit, all funds may not be spent. It is important that all parties involved in the budget process expedite expenditures in order to meet expenditure deadlines.
3.	Are funds allocated by the Office of Correctional Education (OCE) available and spent within program areas?	Yes	The budget tracking includes all categories allotted by OCE.
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by OCE?	Yes	All appropriate categories are noted in the tracking system.
5.	Are allocated funds for the Bridging Education Programs, including Arts In Corrections, used to provide program services to inmates?	Yes	Allocated funds for the Bridging Education Programs, including Arts In Corrections, used to provide program services to inmates.
6.	Are law library purchases funded by the institution's general budget?	No	There is an ongoing attempt by CDCR Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies?	Yes	The Principal as well as the Institutional Personnel Office have copies of the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies.
8.	Are the Education Monthly Report and the Education Daily Report accurate and being completed and submitted on a timely basis?	No	The Education Monthly Report and the Education Daily Report is not accurate. There are several areas that are in need of improvement. It is recommended that the VSPW Education Department work with OCE to correct errors.
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes	There is sufficient space for the Bridging Program staff and Artist Facilitator. Discussions and plans are taking place to secure adequate space for the new TV Specialist. It is recommended that adequate space be provided to the TV Specialist who is due to report as a new hire on July 1, 2008. Sufficient space is required to set up a TV Studio to produce education audio/visual presentations. It is also recommended that the VSPW Education Department work with OCE to ensure all the allotted equipment is received. Additionally it is recommended that the institutional AISA assist in setting up any computerized equipment. The TV Specialist work space will be reviewed during the six month revisit.
10.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px; margin-bottom: 5px;">Credentials:</div> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	Yes	The assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification.
12.	<div style="border: 1px solid black; padding: 2px;">Duty Statements:</div> Are 100% of the staff duty statements on file and applicable to current position?	Yes	
13.	<div style="border: 1px solid black; padding: 2px;">Operational Procedures:</div> Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?	Yes	The institution has an Operational Procedure that addresses the legislative mandates of the Bridging Education Program.
14.	Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?	Yes	The institution has an Operational Procedure for the Education Program and it uses Department Operation Manual Chapter 10 as an inclusion
15.	<div style="border: 1px solid black; padding: 2px;">Staff Assignments:</div> Does the Principal maintain a current and complete list of all authorized positions and their status?	Yes	The Principal is encouraged to keep the list updated by contacting OCE personnel tracking staff. The Principal has notified OCE of the new TV Specialist hire.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

16.	Are all staff appropriately working and/or assigned within the education program?	No	There are two teachers coordinating almost entirely college programs contrary to OCE policy and general funding for Adult Basic Education requirements. While it is understood that college programs are a beneficial and sequential part of the education process, no funds for staff or college materials are included in the general funds by CDCR. It is recommended that OCE and the Warden support and encourage the funding of Post Secondary Coordinator positions for each institution to handle distance college and trade school participation. There are also two teachers assigned to handle the education testing process that are not identified by OCE as approved positions for that specific purpose. It is recommended that VSPW Education Department and the Warden work with OCE to clarify these assignments.
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	However, it is noted that the Principal is required to supervise the Hobby Crafts staff contrary to DOM requirements.
18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	Yes	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program?	Yes	
20.	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

21.	Has the Artist Facilitator been officially assigned to the Education Department?	Yes	
22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	Yes	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	Due to the TV Specialist vacancy, a distance education teacher has been trouble-shooting the equipment and contacting Transforming Lives Network for needed support.
24.	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25.	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	Yes	The Principal is to ensure that the Assessment Office Assistant Duty Statement is followed and no other duties are assigned.
26.	<div style="border: 1px solid black; padding: 2px;">Alternative Education Delivery Model (AEDM):</div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	Yes	
27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	No	The education and work program model is not in place as agreed upon on the approved signed AEDM CCPOA agreement.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

28.	Are all Alternative Education Delivery Model positions filled?	Yes	
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	Yes	
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	No	The college distance education programs models are not approved.
31.	<ul style="list-style-type: none"> Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted? 	No	The AEDM staff are providing excellent programming for inmates. However it is not clear from the Education Monthly Report or other available that the each of the models required to serve 120 enrolled inmates are meeting such a requirement. It is recommended that the Principal work with OCE to clarify this issue.
32.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?</p>	Yes	All education staff has received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration
33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	Yes	Female inmates' vocational assignments are being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

34.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Certificates of Completion or Achievement:</div> <ul style="list-style-type: none"> Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned? 	Yes	The Principal will ensure additional training for teachers in accordance with OCE issuance of completion certificates memo. It is recommended that copies of the memo be given to all teachers.
35.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Executive/Supervisory Assignments:</div> <p>Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)</p>	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	Yes	
38.	<ul style="list-style-type: none"> Does the Academic Vice Principal/Vocational Vice Principal provide documented In-Service-Training and On-the-Job-Training? Are all probationary and annual performance evaluations currently due completed? 	Yes	
39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	Yes	
40.	Are Transforming Lives Network quarterly reports being submitted to OCE by the due dates of Oct. 10, January 10, April 10 and July 10?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

41.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Test Of Adult Basic Education:</div> <ul style="list-style-type: none"> Is the Principal trouble shooting Test of Adult Basic Education (TABE) score losses identified on the School Program Assessment Report Card (SPARC)? Is the principal implementing remedial changes to improve the scores? 	Yes	
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes	
44.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Accreditation:</div> <p>Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?</p>	Yes	VSPW received a WASC six year accreditation with now updated review visit required.
45.	<ul style="list-style-type: none"> Is there a continuing WASC process being followed by the school with the action plans being actively addressed in a timely manner? Is there a leadership team in place and do minutes substantiate regular meetings? 	Yes	
46.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Enrollment/Attendance:</div> <p>Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?</p>	No	The Education Monthly Report and other available enrollment/participation rosters for the distance education and independent models did not provide sufficient evidence to confirm quotas.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	No	A specific Bridging Education Program eligibility list could not be obtained. It is most likely that there is a list but none has been made available to the Education Department to date. Further follow up is recommended to confirm such as list is available.
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	Education staff including Relief Teachers, Vice-Principals and clerical staff are attending ICC. It is recommended that clerical staff not be used for Institution ICC.
50.	<div>Bridging Program:</div> Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?	Yes	
51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	Yes	
52.	<div>Transforming Lives Network:</div> Has the Transforming Lives Network satellite dish been installed and operational?	Yes	
53.	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	Yes	
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to OCE?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

55.	Has Transforming Lives Network enrollment and completion data been tracked?	Yes	
56.	<div style="border: 1px solid black; padding: 2px;">GED Testing/High School Credit:</div> <ul style="list-style-type: none"> • Is there a High School credit program and General Educational Development (GED) Testing program that follows OCE and State requirements? • Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates? 	Yes	
57.	<div style="border: 1px solid black; padding: 2px;">Inmate Education Advisory Committee:</div> <p>Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?</p>	Yes	
58.	<div style="border: 1px solid black; padding: 2px;">Education Files</div> <ul style="list-style-type: none"> • Do all of the quarterly CDCR Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions, etc.? • Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.) • Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? 	No	A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerk's assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on OCE memo addressing the Education Files processing.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

59.	<ul style="list-style-type: none"> Are Education Files with a copy of the Record of Inmate Achievement (Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is there a copy of the Record of Inmate Achievement (CDCR Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and are they then transferred to the General Population receiving institution? 	No	<p>A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerks' assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on OCE memo addressing the Education Files processing.</p>
60.	If there are any contracted, OCE sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	Yes	The W-CALM program
61.	<div style="border: 1px solid black; padding: 2px;">Literacy:</div> <p>Are literacy programs available to at least 60% of the eligible prison population?</p>	No	<p>It was not possible to establish the factual percentage since the Education Monthly Report indicates 103% and the inmate eligible count appears lower that it may be. In addition, there is only one TV broadcast channel, no TV Specialist available to date and the activation and availability could not be confirmed. However, the VSPW Education Department is commended for having over 40 inmate tutors.</p> <p>It is recommended that the VSPW Education Department work with OCE to clarify exactly what percentage of the eligible population is being served.</p>
62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	Yes	
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	Yes	A sample includes the Transforming Lives Network and the availability of over 40 inmate tutors including Laubach Literacy International trained tutors. It is recommended that additional literacy delivery systems be established.
65.	Is there an established procedure for placing students into any existing Learning Literacy Lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	
66.	<div style="border: 1px solid black; padding: 2px;">Developmental Disability Program and Disability Placement Program:</div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/OCE policies?</p>	N/A	
67.	<div style="border: 1px solid black; padding: 2px;">ESTELLE/Behavior Modification Programs:</div> <p>Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?</p>	N/A	
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

69.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Correctional Offender Management Profiling for Alternative Sanctions – Risk and Needs Assessment:</div> <p>Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?</p>	Yes	
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of COMPAS)?	Yes	
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the COMPAS Risk and Needs Assessment Program?	Yes	
72.	Do all designated assessment staff have an individual COMPAS log-on code? Is the security of the code maintained?	Yes	
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the COMPAS Risk and Needs Assessment Program?	Yes	
74.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies:</div> <ul style="list-style-type: none"> Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)? Are inventories of Recidivism Reduction Strategies equipment maintained and current? 	Yes	
75.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies Enhanced Outpatient Program:</div> <p>Are all Enhanced Outpatient Program staff hired and in place?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

76.	Does the Principal (via the Academic Vice-Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with CDCR policy?	N/A	
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	N/A	
78.	<div>Multi-Agency Re-entry Program (SB 618):</div> Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?	N/A	
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A	
80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	
81.	<div>Vocational-Recidivism Reduction Strategies</div> Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?	N/A	
82.	Are all Recidivism Reduction Strategies vocational classes at full enrollment?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

NO.	INSTITUTION: VSPW DATE: May 190-23,2008 COMPLIANCE TEAM: John Delapp	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Descriptions:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all the of classroom files reflect TABE scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the CDCR Literacy Plan criteria and OCE TABE testing requirements?</p>	No	The Pre-Release and W-CALM classes do not administer the TABE.
3.	<p>Are all of the CDCR Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	No	128B chronological reports are issued instead of the 128E chronological reports required by policy. Several inmate clerk time cards (CDCR 1697s) were not started or completed.
4.	<p>Is 100% of the CDCR curriculum recording system in-use, accurate, and current?</p>	No	Some classes use in house recording system and not the CDCR /OCE competencies recording system.
5.	<p>Do 100% of the Permanent Class Record Cards (CDCR Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?</p>	Yes	However it must be noted that the education/SAP classes record only the half-day education attendance.
6.	<p>Are Certificates of Completion or Achievement being issued to those students earning them?</p>	Yes	
7.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> <p>Do all of the academic education classes have lesson plans that agree with the CDCR approved curriculum?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

8.	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	The high school classes are the only ones issuing required and elective credits. The other classes do not issue required or elective credits.
9.	Do all of the academic education classes have course outlines that agree with the CDCR approved curriculum?	Yes	
10.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Bridging Education Program Instructional Expectations:</div> Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?	Yes	The teachers were using the approved OCE Bridging Education curriculum.
11.	Are the TABE and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	Yes	All of the files had TABE scores; a very small percentage of the files had CASAS scores.
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (CDCR Form 151) that is up to date and accurate?	Yes	The PCR cards were current and up to date. However, all of the bridging classes were under quota. Given the current inmate population at VSPW all of the classes should be at full quota. There appears to be an inmate assignment issue.
13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	Yes	The teachers had written daily weekly schedules.
14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">TABE Testing Coordinator:</div> Are gain/loss reports (School Progress Assessment Report Card) and the TABE sub-test reports reviewed/shared with the education supervisors?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

15.	Do the TABE Coordinator and at least two others have access to a CDCR email address and user account?	Yes	They have access to the share drive to be able to download the database.
16.	Does the TABE Coordinator have the most recent TABE database (within a week)?	Yes	
17.	Are TABE testing protocols signed by current staff?	Yes	
18.	Are the TABE testing materials secured in a locked cabinet (mandatory standards)?	Yes	
19.	Is a master inventory of TABE test booklets and answer sheets maintained by the testing coordinator?	No	The audit team was unable to verify the existence of a master comprehensive computerized inventory. There is no inventory of the answer sheets. The TABE Coordinator needs to include an inventory of answer sheets to the computerized master inventory to account for all test materials including their location and current status.
20.	Is the TABE binder current and up-to-date with memos, purchase orders and instructions?	Yes	The TABE binder must be maintained with current and up-to-date memos, purchase orders and instructions. The staff were aware of the content of the latest memorandum
21.	Is the TABE locator test being used when needed to determine which level appropriate TABE test to administer?	No	The TABE coordinator indicated they have found that the inmates were memorizing the locator test resulting in inmates being tested in an inappropriate test level. They are now using an interview and an explanation of test level explanation before the inmates are tested and have seen a reduction of testing in the wrong level.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

22.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Teacher-TABE Testing</div> <p>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix?</p>	No	<p>All teachers are not testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not TABE testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers.</p>
23.	<p>Are the TABE tests administered according to the testing matrix?</p>	No	<p>TABE tests are not being administered by all teachers according to the testing matrix The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers.</p>
24.	<p>Is the TABE locator being used when needed to determine which level appropriate TABE test to administer?</p>	No	<p>The TABE locator test is not being used when needed to determine which level appropriate TABE test to administer.</p>
25.	<p>Are teachers using TABE pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?</p>	No	<p>The Pre-Release and W-CALM classes are not using the TABE pre-post subtest diagnostic reports for student needs assessment nor are they reviewing test scores with inmates.</p>
26.	<p>Are teachers using the TABE pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes?</p>	No	<p>The Pre-Release and Conflict and Anger Lifelong Management (W-CALM) teachers are not using the TABE pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes</p>

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

27.	Are current TABE subtests placed in student's file?	No	In at least one case the current TABE subtests is placed in a separate locked file instead of the student file.
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Alternative Education Delivery Models:</div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	No	There are no open line schedules for the Distance Learning Alternative Education Delivery Model. The teachers are coordinating and assisting inmates enrolled in primarily California Community College classes within a classroom services center setting.
29.	Are the Television Specialist and Distance Learning Study Teachers developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	No	There is no Television Specialist hired to date. The Distance Learning teachers that are coordinating primarily college programs are not using the education channel to deliver courses. However, a teacher is running Transforming Lives Network very successfully.
30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?	No	There is no Television Specialist and the Distance Learning teachers running primarily college programs are not using the education channel to deliver courses. However, a teacher is running the Transforming Lives Network very successfully including the use of Kentucky Educational Television videos.
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with OCE approved curriculum?	Yes	
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with OCE approved curriculum?	No	There are no Education/Work Program (half-time) classes.
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with OCE approved curriculum?	No	The Distance Learning classes do not have current course outlines and lesson plans that agree with OCE approved curriculum Distance Learning because the teachers are primarily coordinating college programs.
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with OCE approved curriculum?	Yes	
36.	<ul style="list-style-type: none"> Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' TABE subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? 	No	Teachers are not testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model programs (AEDM). AEDM teachers are not TABE testing students. It is recommended that the Comprehensive Adult Student Assessment System (CASAS) testing be required by policy from OCE for programs such as Alternative Education Delivery Models requiring 120 enrollment, Women's Conflict and Anger Lifelong Management, Bridging Education, Pre-Release, and other short duration or large enrollment programs.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

37.	<ul style="list-style-type: none"> Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? 	No	No evidence was found that AEDM rosters are given to the Vice Principal and Principal on at least a weekly basis.
38.	Are students' gains being recorded and tracked?	No	The Alternative Education Delivery Model programs requiring 120 enrollments do not have a formal measurement instrument/tool or system in place for all students.
39.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Do all of the academic life skills classes have current course outlines that agree with OCE/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM) (Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?</p>	Yes	
40.	Do all of the academic life skills classes have current lesson plans that agree with OCE/Gender Responsive Strategies approved curriculum?	Yes	
41.	<div style="border: 1px solid black; padding: 2px;">ESTELLE and Behavior Modification Unit programs:</div> <p>Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	N/A	
43.	<ul style="list-style-type: none"> Do ESTELLE students have access to computers as required in the framework of the program for training? Does the teacher have TABE scores on all of the students in the program? 	N/A	
44.	<div style="border: 1px solid black; padding: 2px;">COMPAS – Risk and Needs Assessment:</div> <p>Are assessment teachers conducting assessments on eligible inmates as defined by the current COMPAS Operations Manual?</p>	Yes	
45.	Does assessment staff utilize the current standardized COMPAS Tracking Form?	Yes	
46.	Are the COMPAS questionnaires shredded daily in accordance with the confidential document procedure?	No	The COMPAS teacher indicated it usually takes more than one day to complete the questionnaire. The incomplete questionnaires are locked in the assessment Office Technician's desk till they are completed and the data is entered into the computer. A shredder is located in their work area.
47.	Are assessment interviews conducted in a semi-private environment?	Yes	The teachers make sure no other inmates are within hearing distance when they are conducting an interview.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

48.	Is appropriate assistance provided to inmates during participation in the COMPAS assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	Yes	
49.	<div style="border: 1px solid black; padding: 2px;">Security and Order:</div> <p>Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?</p>	Yes	However, in one case the teacher had put the alarm away right before the interview.
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
51.	<div style="border: 1px solid black; padding: 2px;">Pre-Release</div> <p>Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?</p>	Yes	
52.	Do all of the Pre-Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	
53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	yes	
54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	No	The CDCR/OCE Pre-Release curriculum recording system is not in use. However, there are two in house tracking systems used.
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

56.	Is the Pre-Release class a full-time program (four days/8.5 hours or five days/6.5 hours)? If no, is there an exemption on file?	Yes	
57.	Are all of CDCR Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?	No	The CDCR Form 128E required by OCE policy to be used to record all education participation, including course completions, is not used. The CDCR Form 28B is used instead of the 128E contrary to OCE policy.
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	
59.	Does the Pre-release teacher provide OCE with monthly Pre-release Program reports on time and maintain copies of those monthly Pre-release program reports?	Yes	
60.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies Enhanced Outpatient Program:</div> Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?	N/A	
61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	N/A	
62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	N/A	
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

64.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Transforming Lives Network Program:</div> <p>Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.?</p>	No	Alternate modalities are not available for use within the housing units for the Distance Learning program. Alternate modalities such as, Kentucky Education Television videos, Transforming Lives Network satellite feeds/videos, institutional television, visual worksheets need to be developed and implanted within the housing units.
65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	No	There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	No	There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	No	A system to give school faculty members the opportunity to provide input into the broadcast schedule has not been put in place.
68.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recreation/Physical Education (P.E.):</div> <p>Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?</p>	Yes	
69.	Does the Physical Education teacher follow the CDCR approved selection process for movies?	Yes	
70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	Yes	
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	Yes	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (CDCR Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	Yes	Officers keep the records for inmates who work for the Physical Education teacher.
76.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Recidivism Reduction Strategies (Physical Education): </div> Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?	Yes	
77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

NO.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Ron Callison, Beverly Penland	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Description:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all of classroom files reflect TABE scores that are not over six months old for students under the CDCR Literacy Plan and OCE TABE testing criteria?</p>	Yes	
3.	<p>Are all of the CDCR Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	No	<p>One of the program teachers is not completing 128E chronological quarterly reports. Some of the 128E chronological reports are inaccurate in reporting of the units completed each quarter.</p>
4.	<p>Is the curriculum recording system in-use, accurate, and current?</p>	Yes	
5.	<p>Does the Permanent Class Record Card (CDCR Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?</p>	Yes	
6.	<p>Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?</p>	No	<p>Teachers were unaware that elective credits could be issued.</p>
7.	<p>Are Trade/Industry Certifications being issued and recorded to those students earning them?</p>	Yes	<p>Several of the programs are working on be able to add additional industry certification to their programs.</p>
8.	<p>Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

9.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Instructional Expectations:</div> <p>Do all of the vocational education classes have course outlines that agree with the CDCR curriculum?</p>	No	Most of the program teachers do not have course outlines of their programs.
10.	Do all of the vocational education classes have lesson plans that agree with the CDCR curriculum?	Yes	
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	Yes	
12.	Are Vocational Instructors conducting and documenting at least four hours of approved related formal classroom training each week for all inmate students?	Yes	
13.	Are all of the vocational programs that have a nationally recognized certification programs participating in that program?	Yes	
14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies:</div> <p>Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?</p>	N/A	
15.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">National Center for Construction Education and Research:</div> <p>Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?</p>	Yes	
16.	Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

17.	Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?	Yes	
18.	Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?	Yes	
19.	Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?	Yes	
20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	
21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to OCE within 60 days?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">TABE Testing</div> Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix?	Yes	Students are assigned to an academic class where they are interviewed and administered the TABE. They are then recommended for an education assignment. They are then assigned as a class opening becomes available.
29.	Are the TABE tests administered according to the testing matrix?	Yes	The TABE coordinator sends a list of students who need to be post-tested and the teacher administers the TABE post-test.
30.	Is the TABE locator being used, when needed, to determine which level appropriate TABE test to administer?	No	The Teachers do not administer the initial test. The TABE coordinator identifies the appropriate post test level.
31.	Are teachers using TABE pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

32.	Are teachers using the TABE test results as a diagnostic tool for individualized instruction and trouble shooting TABE score losses in their classes?	Yes	
33.	Are current TABE subtests placed in student's file?	Yes	
34.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with OCE/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?</p>	No	All of the teachers have not received Gender Responsive Strategies training and do not have course outlines reflecting the Gender Responsive Strategies curriculum.
35.	Do all or more of the vocational classes have current lesson plans that agree with OCE/Gender Responsive Strategies approved curriculum?	No	Gender Responsive Strategies have not been incorporated into the program lesson plans.
36.	<div style="border: 1px solid black; padding: 2px;">Security and Order:</div> <p>Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?</p>	Yes	
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	Yes	
39.	Is at least one hour per month of safety meetings being held and documented?	Yes	
40.	<div style="border: 1px solid black; padding: 2px;">Trade Advisory Committee:</div> <p>Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly?</p>	No	Some of the vocational programs do not a Trade Advisory Committee or attend or conduct any Trade Advisory Committee meetings.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

41.	Job Market Analysis: Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	No	Some programs did not have a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey to share with their students.
42.	Apprenticeship: Is there an active Apprenticeship Training Program?	N/A	
43.	If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	
45.	Employee and Community Services Programs. If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?	Yes	
46.	If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

NO.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Christine Long	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Library Staffing:</div> <ul style="list-style-type: none"> Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff? Does the Senior Librarian implement/plan the library program? 	Yes	An Academic Vice-Principal supervises the library staff. The Senior Librarian implements the library program.
2.	<div style="border: 1px solid black; padding: 2px;">Department Operations Manual and Department Operations Manual Supplement:</div> <ul style="list-style-type: none"> Is the current Department Operations Manual, Section 53060 available in the main libraries and satellite libraries? Is there a Department Operations Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operations Manual supplement reflect the current, actual local library program? 	Yes	The Library and Law Library Department Operation Manual supplement is due for revision May 2008.
3.	<div style="border: 1px solid black; padding: 2px;">General Population (GP) Access Hours:</div> <ul style="list-style-type: none"> Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours? Do General Population inmates have regular access to non-legal library services? 	Yes	The library hours are posted on the windows of the front and back doors and are posted in each of the housing units. Evening hours are available on Tuesday, Wednesday, Thursday, and weekend hours on Saturday. Actual access depends on yard release. The library by custody staff.
4.	<div style="border: 1px solid black; padding: 2px;">General Population/Law Library Documentation:</div> <ul style="list-style-type: none"> Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use? Is there a list showing inmates who request legal access, and those who received access? 	Yes	Requests are collated and stapled by date ducated. Database of verified legal deadlines updated as requests are received and verified by library staff.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

5.	<div style="border: 1px solid black; padding: 2px;">Restricted Housing Status Inmate Access:</div> <ul style="list-style-type: none"> • If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library? • Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request? 	Yes	Procedures for providing physical access to restricted housing inmates are included in the library program Department Operation Manual supplement.
6.	<div style="border: 1px solid black; padding: 2px;">Restricted Housing Status Non-Legal Library Services:</div> <p>Do Restricted Housing inmates receive general library services?</p>	Yes	Inmates submit a request for the books. If available, the Library Technical Assistant from A facility will deliver books to Administrative Segregation /Security Housing Unit. There is a need for more titles.
7.	<div style="border: 1px solid black; padding: 2px;">Library Expenditures:</div> <ul style="list-style-type: none"> • Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? • If other items are purchased, are they for library use? 	Yes	
8.	<div style="border: 1px solid black; padding: 2px;">Inmate Welfare Funds (IWF) Expenditure:</div> <p>Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?</p>	Yes	There is a question as to why the purchase of some ethnic magazines was denied (i.e. Ebony, TV Novelas)

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

9.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Law Library Expenditure:</div> <ul style="list-style-type: none"> Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room? Are the Stock Received Reports completed and submitted to the Regional Accounting Office? 	Yes	
10.	<ul style="list-style-type: none"> Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Data System computer? Are the law books shelved promptly? 	Yes	
11.	<ul style="list-style-type: none"> Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them? 	No	The Warehouse notifies the Senior Librarian who picks up the discs and then loads them on to the computers.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	
13.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Library Book Stock - Quality, Part I:</div> <ul style="list-style-type: none"> Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years.) Does the library program have at least three directories relevant to the questions asked by the population served? 	No	The encyclopedia is dated 2001, a new one was recently ordered. The unabridged dictionary is a 1993 edition. The Senior Librarian will purchase a new one with reduced recidivism funds. The library has a 2008 Directory of Attorneys, 2006 Headquarters USA, 2006-2007 Washington Info Directory Information directory

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

14.	<div style="border: 1px solid black; padding: 2px;">Library Book Stock - Quality, Part II:</div> <p>Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?</p>	No	The Main library has a 2007 World Almanac; the atlases are more than three years old. The libraries maintain dictionaries within age limits.
15.	<div style="border: 1px solid black; padding: 2px;">Library Book Stock - Quality, Part III:</div> <ul style="list-style-type: none"> • Does each library regularly inspect the physical condition of their books? • Does the library program have a book repair procedure 	Yes	
16.	<div style="border: 1px solid black; padding: 2px;">Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity:</div> <p>Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?</p>	No	The Facility A library collection is lacking adequate titles.
17.	<div style="border: 1px solid black; padding: 2px;">Library Book Stock - User Orientation:</div> <ul style="list-style-type: none"> • Are book collections designed to meet the needs and interests of the inmate population served? • Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box? 	Yes	The Senior Librarian regularly reviews inmate suggestions for purchases. The Senior Librarian has begun to attend the Site Literacy meeting, meets with the Women's Advisory Committee, and has one Library Clerk who is the library representative for the Inmate Education Advisory Committee.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

18.	Library Book Stock - Quantity: (Department Operations Manual Book Aug) <ul style="list-style-type: none"> Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding? 	Yes	
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	Yes	Year One titles have been processed and shelved. Purchases for Year Two funding are being prepared.
20.	Book Access: <ul style="list-style-type: none"> Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? 	No	The library uses the Follett automated circulation system. Staff performs circulation duties. Inmates are not allowed to use the circulation computer - institution policy. There is no Interlibrary Loan process in place.
21.	Circulation: <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	No	The Advantage Plus update to the circulation system can now only be accessed through the Internet. There is an adequate overdue system.
22.	Mandated Law Library/California Code of Regulations, Department Operations Manual <ul style="list-style-type: none"> Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual? Are all the Law Library Electronic Data System computers up-to-date and operating in each library? 	No	The library has begun to receive printed updates but has a break in some editions. The library has not received Law Week yet. Bulletin boards are mounted in each library to display revisions, etc.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

23.	Law Library - American Disability Act (ADA): Are American Disability Act mandatory postings present in the library?	Yes	
24.	Circulating Law Library: Is a procedure for accessing the Circulating Law Library in place?	No	The library has an agreement with the Madera County Law Library to obtain needed books to photocopy the requested cases.
25.	Court Deadlines: Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	Inmates with court deadlines are required to complete a Request for Verification of Court Deadline and to submit a copy of their court document. A database is kept of priority users.
26.	Law Library Forms and Supplies: Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	
27.	General Library Forms and Supplies: Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	Yes	
28.	Inmate Clerk Training: <ul style="list-style-type: none"> Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? 	No	The current law library clerks received training from a previous law clerk that was a trained paralegal. Staff provides initial training in general library processes. Print materials are available on the procedures for book repair.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

29.	<div data-bbox="164 247 914 300">Security and Order:</div> <ul style="list-style-type: none">• Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms?• Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
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COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
1.	Duty Statement/Job Description/Credentials – Literacy Learning Lab Do you have a current duty statement on file (within one year)?	Yes	Mr. Steve Culver is an outstanding Literacy Learning Lab teacher.
2.	Do you have a valid credential on file?	Yes	Valid credential in Education Office.
3.	Security/Order – Literacy Learning Lab Are personal alarms issued by the institution to teaching staff and worn?	Yes	Mr. Culver also has a whistle.
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	Exit sign is above the door with the evacuation plans on the left side of the door.
5.	Supervisory/Support – Literacy Learning Lab Do you receive support from your supervisor and other educational staff?	Yes	Good support from Mr. Connolly, SAI.
6.	Does the Vice Principal visit/observe your class? Does the Principal visit/observe your class? Do you maintain a sign-in log?	Yes Yes Yes	Mr. Connolly visits three to four times a week. Mr. Patrick visits rarely.
7.	Inmate Enrollment – Literacy Learning Lab Do you maintain a minimum enrollment of 27 students?	Yes	Twenty-seven students for 6.5 hours per day.
8.	Do students receive direct/group instruction?	Yes	Group work on board and in packets covering all subject areas.
9.	Is the Literacy Learning Lab a "self contained" program?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

10.	Student Records/Testing Achievements – Literacy Learning Lab Do you verify non-General Education Development or non-High School graduation of the student?	Yes	Mr. Culver checks with the GED Coordinator to verify the GED or High School Diploma.
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	Yes	Mr. Culver begins the student file immediately upon entering the Plato Lab
12.	Does each student have a current TABE score? <i>If not, do you refer the student for testing?</i>	Yes	TABE and CASAS scores current. If student's TABE score is not current Mr. Culver will test student.
13.	Do you assess student's basic skill level? <i>Describe</i>	Yes	Teacher interviews student and has the student read orally to determine reading level.
14.	Are at least 90% of the CDCR Form 128E chronological reports, classroom records and accountability documents current, accurate and secured?	Yes	All student files are current, accurate, and secured in locked cabinet.
15.	Are the Student Files current (incl. TABE scores and any other assessment scores)? <i>Review</i>	Yes	All scores are current.
16.	Is there a current Student Job Description on file?	No	The Federal Education Grievance Procedure policy is not included in Student Job Description. Memo dated June 23, 2006.
17.	Instructional Expectations – Literacy Learning Lab Do you use the approved CDCR Competency Based Adult Basic Education curriculum?	Yes	Incorporated in group work and packets.
18.	Are differentiated instructional methods used? <i>Describe</i>	Yes	Group and peer learning.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

19.	Do students track their own progress?	Yes	Students receive assignment work weekly and they track their PLATO progress from the software.
20.	Do the students receive computer orientation? Is there continuous training? Describe	Yes Yes	The teacher does the orientation and on going training, if needed, with each new student.
21.	Do you maintain course outlines and lesson plans? Review files	Yes	Outstanding outlines and lesson plans daily and weekly. Competencies are checked off.
22.	Do you use alternative assessment instruments (besides the required TABE), to determine a student's instructional plan? Describe	Yes	Teacher generates reading and math quizzes for student assessment.
23.	Do students spend an average of six months of instructional time enrolled in the program?	Yes	Six months is the average stay.
24.	<div style="border: 1px solid black; padding: 2px;">Other Services – Literacy Learning Lab</div> Do you refer students to other services, i.e. medical? Describe the process	Yes	Teacher would contact medical, only if necessary.
25.	Do you provide the students career-related information?	Yes	Job related activities, goal setting and other life skills such as the PLATO software.
26.	Do you have student aides? If so, how many and how are they used?	Yes	One student aide. She provides tutoring and clerical support for the Literacy Learning Lab.
27.	<div style="border: 1px solid black; height: 1.2em; width: 100%;"></div> Have you participated in conferences, workshops and seminars from July 1, 2007–December 31, 2008? If so, provide a list.	Yes	Reading Plus training in August, 2007, for new software program.
28.	<div style="border: 1px solid black; padding: 2px;">Expenses – Literacy Learning Lab</div> Are spending levels appropriate for material purchases and training to support program needs?	Yes	Mr. Culver is satisfied with the spending levels.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

29.	Equipment – Literacy Learning Lab Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? Conduct an inventory	No No	This Literacy Learning Lab has new computers. PLATO has not been out to open the upgrades. Mr. Culver has tried to make arrangements, but PLATO has not responded.
30.	Is your software appropriately maintained by PLATO's technical field staff?	Yes No	Mr. Culver is very happy with the PLATO software. However he would like to have the upgrades installed. The Reading Plus software is not installed. CCWF received the software program in August, 2007.
31.	Do you register all new software purchases with the Associate Information Systems Analyst?	Yes	The AISA is aware of all software used in the Literacy Learning Lab.
32.	Committees/Meetings – Literacy Learning Lab How often do you meet with the referral teacher for consultation on a student?	N/A	
33.	CASAS/TOPSpro Management Information System (MIS) Coordinator Have you been trained in the area of California Accountability and the TOPSpro Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? Dates of last trainings	Yes Yes	Ms. Deanna Maddock attended the April, 2008 and the October, 2007 TOPSpro training conducted by the WIA Administrator. She also attended the 2007 CASAS Summer Inst.
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? Explain the CASAS testing procedures at your institution.	Yes	VSPW has an adequate amount of testing materials. Sign-out and Sign-in sheet is used to track test booklets.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	Yes	Locked in cabinet in secured Testing Office.
36.	Are you using the latest version of the TOPSpro Management Information System software?	No	TOPSpro version 4.55. Two upgrades have been sent out since this version.
37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	Yes	The scanner works well. The computer was just upgraded from NT to XP.
38.	Do you provide each teacher with a Student Performance by Competency Report to assistance them in preparing lesson plans?	Yes	Competency Reports for Students and Class. Student Gains by Class Report.
39.	Do you know how to generate the California Payment Point Report? Can you generate a Preliminary Payment Point Report?	Yes Yes	After each scanning to keep tabs on student progress for teachers. Assist Coordinator with data cleaning.
40.	Are the appropriate students receiving and completing the Core Performance Surveys? <i>Explain the process in place to ensure that students are receiving the surveys.</i>	Yes	If the ex-student is still at the institution the CASAS Coordinator locates student to complete survey via the mail and submit to the WIA Administrator.
41.	Can you generate an up to date list of students that will be receiving the Core Performance Survey for the past quarter?	Yes	Third Quarter data showed "No Student Qualified". CASAS Coordinator would locate ex-student to have them fill out survey.
42.	Can you generate a Data Integrity site review?	Yes	Data Integrity Report is used for assisting Coordinator to locate errors in the data.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

43.	Can you generate a Student Gains by Class Report? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	Yes Yes	This report is given to the teachers to account for the students learning gains. All records matched. Ms. Maddock is a dedicated CASAS Coordinator
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COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

No.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Tom Posey	Yes/No or N/A	COMMENTS
1.	Does the Incarcerated Youth Offender Teacher have a copy of the current Incarcerated Youth Offender Grant?	Yes	
2.	Is there a signed Incarcerated Youth Offender Enrollment Agreement on file for each participant?	Yes	
3.	Is there evidence on file that each participant graduated from high school or passed the General Education Development exam?	Yes	
4.	Is there a Participant Demographic/ Biographic information sheet on file and, that his/her portfolio has been started?	Yes	
5.	Does the Incarcerated Youth Offender Teacher use CAPS, COPS AND COPES to identify inmate job skills?	Yes	
6.	Are the results of CAPS, COPS AND COPES assessment on file?	Yes	
7.	Does the Incarcerated Youth Offender Teacher Identify inmate jobs indexed to skills?	Yes	
8.	Does the Incarcerated Youth Offender Teacher provide job counseling and job resumes for participant?	Yes	
9.	Does the Incarcerated Youth Offender Teacher provide academic and vocational training courses for participants?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

10.	Does the Incarcerated Youth Offender Teacher track success of Incarcerated Youth Offender participants after parole?	Yes	
11.	Does the Incarcerated Youth Offender Teacher provide services to prisons in surrounding areas?	Yes	
12.	Does the Incarcerated Youth Offender Teacher use the Internet, phone and fax to establish contact with Parolees?	Yes	
13.	Does the Incarcerated Youth Offender Teacher meet at least once on a quarterly basis with active participants in Incarcerated Youth Offender?	Yes	
14.	Does the Incarcerated Youth Offender Teacher indicate in Incarcerated Youth Offender database why inmates have declined or dropped from the Incarcerated Youth Offender program?	Yes	
15.	Does the Incarcerated Youth Offender Teacher communicate and maintain rapport with Vocational and Academic teachers?	Yes	
16.	Does the Incarcerated Youth Offender Teacher prepare and submit reports to the Incarcerated Youth Offender Program Coordinator via memos and the Incarcerated Youth Offender database?	Yes	
17.	Does the Incarcerated Youth Offender Teacher attend training, Incarcerated Youth Offender quarterly meetings and pertinent conferences?	Yes	
18.	Does the Incarcerated Youth Offender Teacher maintain a hard file for each active/inactive or former participant and participant parolee?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

19.	Does the Incarcerated Youth Offender Teacher's hard copy file contain assessment information, enrollment and tuition agreements, evidence of General Education Development or high school completion, contact information and relevant chronological documentation?	Yes	
20.	Does the Incarcerated Youth Offender Teacher's hard file and database information are consistent and in agreement with each other?	Yes	
21.	Does the Incarcerated Youth Offender Teacher ensure that the inventory sheet is up to date; all equipment is clearly marked and identified with Incarcerated Youth Offender inventory tags?	Yes	
22.	Does the Incarcerated Youth Offender Teacher work with contracted vendors to help with the successful transition from prison to parole?	Yes	
23.	Does the Incarcerated Youth Offender Teacher check to ensure transfers from other Incarcerated Youth Offender institutions still meet eligibility requirements?	Yes	
24.	Does the Incarcerated Youth Offender Teacher ensure that only the Incarcerated Youth Offender Representative uses Incarcerated Youth Offender equipment?	Yes	
25.	Does the Incarcerated Youth Offender Teacher use Offender Based Information System to update the candidate pool on a monthly basis?	Yes	
26.	Does the Incarcerated Youth Offender Teacher Issues trust withdrawals for any materials or equipment loaned to participants?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

27.	Does the Incarcerated Youth Offender Teacher maintains all information for each participant in the Incarcerated Youth Offender database and is it current and up to date to include, but not limited to, the following database fields (minimum fields to be completed)?	Yes	
a.	CDCR #;First and Last name	Yes	
b.	Earliest Possible Release Date; Date Of Birth	Yes	
c.	Date Enrolled in the Incarcerated Youth Offender program	Yes	
d.	Participant Notes if applicable	Yes	
e.	Program Exit Code if applicable	Yes	
f.	Program Exit Date if applicable	Yes	
g.	Parole Region, Unit and County if known	Yes	
h.	Training programs recorded as a separate record and corresponding tuition agreement in participant's file	Yes	
i.	Program Name; Entry Date; Completion Date; Early Exit Date and Reason (if applicable); notes on status of course/course completion, earned grade etc. in Training Placement record	Yes	
j.	Expense Date; Amount; Training Provider; Training Program; Participant Name; CDCR Number and applicable notes	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

k.	Incarcerated and post incarcerated address noted and recorded as separate records in Location Info.	Yes	
l.	Uses DDPS disk to update Incarcerated Youth Offender database	Yes	
m.	Has internet access; uses internet as resource for employment and other transitional information for participant	Yes	
n.	Sends and receives changes to Incarcerated Youth Offender database to Headquarters within 24 hours of receiving update disk from Headquarters.	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Inmate Enrollment</div> <p>Is the class meeting OCE required enrollment quota?</p> <p>(Note the actual enrollment in the comments section).</p>	Yes	<p><i>Quota: 216</i> <i>Enrollment: 216</i></p> <p><i>27 students per each of the eight instructors.</i></p>
2.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Equipment Inventory</div> <p>Is the Vocational and Technical Education Act equipment properly tagged?</p> <p>(Note the condition of equipment in the comments section).</p>	Yes	<p><i>Condition of equipment: All equipment is in good condition.</i></p>
3.	Is Vocational and Technical Education Act equipment used for the intended purpose?	Yes	
4.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Student Records/Testing Achievements</div> <p>Are course completions being issued for OCE program training requirements?</p> <ul style="list-style-type: none"> ▪ How many students are trained per year? <p>(Note the number of students trained per year in the comments section).</p>	Yes	<p><i>Number of students trained per year: 597.</i></p> <p>AR/EPA, NCCER, and C-Tech. Other shops working on CSS, PAP & OPESA</p>
5.	Do Student files verify equipment training on CDCR Form 128E?	Yes	
6.	Is OCE-approved curriculum and recording system in use?	Yes	
7.	Are lesson plans in accordance with OCE guidelines?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

8.	Related Training Is safety and literacy training taking place in accordance with OCE guidelines?	Yes	
9.	Vocational Classroom Physical Access Are students able to get physical to the vocational shops over 50% of the time? (Note the "X" and "S" time for the last two prior months).	Yes	<i>Month 1/X=18,180 S=9,400</i> <i>Month 2/X=16,704 S=7,539</i> The majority of "S" Time is due to late release by custody.
10.	Trade Advisory Committee Are quarterly meetings held and minutes kept? <i>(Note the Number of Trade Advisory Committee members, number in the comments section).</i>	No	Number of TAC members: 45 The only exception is that the Air Conditioning and Refrigeration TAC member refused to come into the prison and instructor was told that TAC members had to come in since the Instructor is not allowed top go out to the community.
11.	Supplemental Areas (not counted for points on the overall Compliance Review) Apprenticeship: <ul style="list-style-type: none"> ▪ Number of apprentices_____ ▪ Institutional Pay_____ ▪ Union/Company Affiliation_____ _____ ▪ Current DAS Form_____ ▪ OJT Work Logged_____ ▪ Less than 5 years_____ 	N/A	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

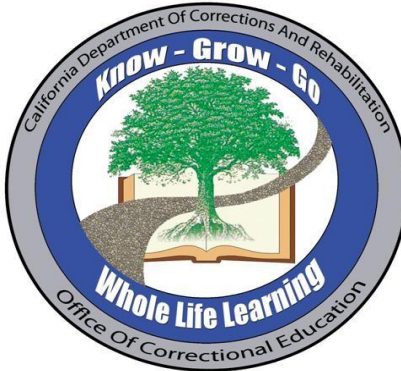
Carl D. Perkins Act
Vocational and Technical Education Act Grant

12.	Is the shop clean? (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	
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DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE

EDUCATIONAL COMPLIANCE BRANCH



COMPLIANCE REVIEW FINDINGS

Valley State Prison for Women

May 19 through 23, 2008

ADMINISTRATION

Raul Romero

ACADEMIC EDUCATION

John Delapp; John Jackson

VOCATIONAL EDUCATION

**Beverly Penland; Ron Callison
Zachary Steinhaus**

LIBRARY

Christine Long

FEDERAL SUPPLEMENTARY PROGRAMS

**Mark Lechich
Ron Callison
Tom Posey**

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

No.	INSTITUTION: Valley State Prison for Women (VSPW) DATE: May 19-23, 2008 COMPLIANCE TEAM: Raul Romero	Yes/No or NA	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Allotments/Operating Expenses:</div> <ul style="list-style-type: none"> Does the Principal maintain a budget tracking system to monitor the school departments' complete budget? Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance? 	Yes	The recent budget allotments that include Recidivism Reduction Strategies funds are being added to the tracking system.
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	Yes	Due to the recent allotment just received and the current California Department Of Corrections And Rehabilitation (CDCR) budget deficit, all funds may not be spent. It is important that all parties involved in the budget process expedite expenditures in order to meet expenditure deadlines.
3.	Are funds allocated by the Office of Correctional Education (OCE) available and spent within program areas?	Yes	The budget tracking includes all categories allotted by OCE.
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by OCE?	Yes	All appropriate categories are noted in the tracking system.
5.	Are allocated funds for the Bridging Education Programs, including Arts In Corrections, used to provide program services to inmates?	Yes	Allocated funds for the Bridging Education Programs, including Arts In Corrections, used to provide program services to inmates.
6.	Are law library purchases funded by the institution's general budget?	No	There is an ongoing attempt by CDCR Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies?	Yes	The Principal as well as the Institutional Personnel Office have copies of the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies.
8.	Are the Education Monthly Report and the Education Daily Report accurate and being completed and submitted on a timely basis?	No	The Education Monthly Report and the Education Daily Report is not accurate. There are several areas that are in need of improvement. It is recommended that the VSPW Education Department work with OCE to correct errors.
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes	There is sufficient space for the Bridging Program staff and Artist Facilitator. Discussions and plans are taking place to secure adequate space for the new TV Specialist. It is recommended that adequate space be provided to the TV Specialist who is due to report as a new hire on July 1, 2008. Sufficient space is required to set up a TV Studio to produce education audio/visual presentations. It is also recommended that the VSPW Education Department work with OCE to ensure all the allotted equipment is received. Additionally it is recommended that the institutional AISA assist in setting up any computerized equipment. The TV Specialist work space will be reviewed during the six month revisit.
10.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Credentials:</div> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	Yes	The assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification.
12.	<div style="border: 1px solid black; padding: 2px;">Duty Statements:</div> Are 100% of the staff duty statements on file and applicable to current position?	Yes	
13.	<div style="border: 1px solid black; padding: 2px;">Operational Procedures:</div> Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?	Yes	The institution has an Operational Procedure that addresses the legislative mandates of the Bridging Education Program.
14.	Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?	Yes	The institution has an Operational Procedure for the Education Program and it uses Department Operation Manual Chapter 10 as an inclusion
15.	<div style="border: 1px solid black; padding: 2px;">Staff Assignments:</div> Does the Principal maintain a current and complete list of all authorized positions and their status?	Yes	The Principal is encouraged to keep the list updated by contacting OCE personnel tracking staff. The Principal has notified OCE of the new TV Specialist hire.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

16.	Are all staff appropriately working and/or assigned within the education program?	No	There are two teachers coordinating almost entirely college programs contrary to OCE policy and general funding for Adult Basic Education requirements. While it is understood that college programs are a beneficial and sequential part of the education process, no funds for staff or college materials are included in the general funds by CDCR. It is recommended that OCE and the Warden support and encourage the funding of Post Secondary Coordinator positions for each institution to handle distance college and trade school participation. There are also two teachers assigned to handle the education testing process that are not identified by OCE as approved positions for that specific purpose. It is recommended that VSPW Education Department and the Warden work with OCE to clarify these assignments.
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	However, it is noted that the Principal is required to supervise the Hobby Crafts staff contrary to DOM requirements.
18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	Yes	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program?	Yes	
20.	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

21.	Has the Artist Facilitator been officially assigned to the Education Department?	Yes	
22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	Yes	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	Due to the TV Specialist vacancy, a distance education teacher has been trouble-shooting the equipment and contacting Transforming Lives Network for needed support.
24.	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25.	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	Yes	The Principal is to ensure that the Assessment Office Assistant Duty Statement is followed and no other duties are assigned.
26.	<div style="border: 1px solid black; padding: 2px;">Alternative Education Delivery Model (AEDM):</div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	Yes	
27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	No	The education and work program model is not in place as agreed upon on the approved signed AEDM CCPOA agreement.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

28.	Are all Alternative Education Delivery Model positions filled?	Yes	
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	Yes	
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	No	The college distance education programs models are not approved.
31.	<ul style="list-style-type: none"> Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted? 	No	The AEDM staff are providing excellent programming for inmates. However it is not clear from the Education Monthly Report or other available that the each of the models required to serve 120 enrolled inmates are meeting such a requirement. It is recommended that the Principal work with OCE to clarify this issue.
32.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?</p>	Yes	All education staff has received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration
33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	Yes	Female inmates' vocational assignments are being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

34.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Certificates of Completion or Achievement:</div> <ul style="list-style-type: none"> Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned? 	Yes	The Principal will ensure additional training for teachers in accordance with OCE issuance of completion certificates memo. It is recommended that copies of the memo be given to all teachers.
35.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Executive/Supervisory Assignments:</div> <p>Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)</p>	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	Yes	
38.	<ul style="list-style-type: none"> Does the Academic Vice Principal/Vocational Vice Principal provide documented In-Service-Training and On-the-Job-Training? Are all probationary and annual performance evaluations currently due completed? 	Yes	
39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	Yes	
40.	Are Transforming Lives Network quarterly reports being submitted to OCE by the due dates of Oct. 10, January 10, April 10 and July 10?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

41.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Test Of Adult Basic Education:</div> <ul style="list-style-type: none"> Is the Principal trouble shooting Test of Adult Basic Education (TABE) score losses identified on the School Program Assessment Report Card (SPARC)? Is the principal implementing remedial changes to improve the scores? 	Yes	
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes	
44.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Accreditation:</div> <p>Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?</p>	Yes	VSPW received a WASC six year accreditation with now updated review visit required.
45.	<ul style="list-style-type: none"> Is there a continuing WASC process being followed by the school with the action plans being actively addressed in a timely manner? Is there a leadership team in place and do minutes substantiate regular meetings? 	Yes	
46.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Enrollment/Attendance:</div> <p>Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?</p>	No	The Education Monthly Report and other available enrollment/participation rosters for the distance education and independent models did not provide sufficient evidence to confirm quotas.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	No	A specific Bridging Education Program eligibility list could not be obtained. It is most likely that there is a list but none has been made available to the Education Department to date. Further follow up is recommended to confirm such as list is available.
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	Education staff including Relief Teachers, Vice-Principals and clerical staff are attending ICC. It is recommended that clerical staff not be used for Institution ICC.
50.	<div style="border: 1px solid black; padding: 2px;">Bridging Program:</div> Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?	Yes	
51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	Yes	
52.	<div style="border: 1px solid black; padding: 2px;">Transforming Lives Network:</div> Has the Transforming Lives Network satellite dish been installed and operational?	Yes	
53.	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	Yes	
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to OCE?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

55.	Has Transforming Lives Network enrollment and completion data been tracked?	Yes	
56.	<div style="border: 1px solid black; padding: 2px;">GED Testing/High School Credit:</div> <ul style="list-style-type: none"> • Is there a High School credit program and General Educational Development (GED) Testing program that follows OCE and State requirements? • Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates? 	Yes	
57.	<div style="border: 1px solid black; padding: 2px;">Inmate Education Advisory Committee:</div> <p>Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?</p>	Yes	
58.	<div style="border: 1px solid black; padding: 2px;">Education Files</div> <ul style="list-style-type: none"> • Do all of the quarterly CDCR Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions, etc.? • Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.) • Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? 	No	A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerk's assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on OCE memo addressing the Education Files processing.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

59.	<ul style="list-style-type: none"> Are Education Files with a copy of the Record of Inmate Achievement (Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is there a copy of the Record of Inmate Achievement (CDCR Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and are they then transferred to the General Population receiving institution? 	No	<p>A review of student Education Files indicated lack of appropriate required documentation and processing. It is recommended that all Education Files be examined by education supervisors for appropriate content. It is also recommended that the involvement of inmate clerks' assistance be reviewed and discussed with OCE to ensure that inmate clerks do not handle Education Files containing confidential information as denoted on OCE memo addressing the Education Files processing.</p>
60.	If there are any contracted, OCE sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	Yes	The W-CALM program
61.	<div style="border: 1px solid black; padding: 2px;">Literacy:</div> <p>Are literacy programs available to at least 60% of the eligible prison population?</p>	No	<p>It was not possible to establish the factual percentage since the Education Monthly Report indicates 103% and the inmate eligible count appears lower that it may be. In addition, there is only one TV broadcast channel, no TV Specialist available to date and the activation and availability could not be confirmed. However, the VSPW Education Department is commended for having over 40 inmate tutors.</p> <p>It is recommended that the VSPW Education Department work with OCE to clarify exactly what percentage of the eligible population is being served.</p>
62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	Yes	
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	Yes	A sample includes the Transforming Lives Network and the availability of over 40 inmate tutors including Laubach Literacy International trained tutors. It is recommended that additional literacy delivery systems be established.
65.	Is there an established procedure for placing students into any existing Learning Literacy Lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	
66.	<div style="border: 1px solid black; padding: 2px;">Developmental Disability Program and Disability Placement Program:</div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/OCE policies?</p>	N/A	
67.	<div style="border: 1px solid black; padding: 2px;">ESTELLE/Behavior Modification Programs:</div> <p>Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?</p>	N/A	
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

69.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Correctional Offender Management Profiling for Alternative Sanctions – Risk and Needs Assessment:</div> <p>Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?</p>	Yes	
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of COMPAS)?	Yes	
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the COMPAS Risk and Needs Assessment Program?	Yes	
72.	Do all designated assessment staff have an individual COMPAS log-on code? Is the security of the code maintained?	Yes	
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the COMPAS Risk and Needs Assessment Program?	Yes	
74.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies:</div> <ul style="list-style-type: none"> Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)? Are inventories of Recidivism Reduction Strategies equipment maintained and current? 	Yes	
75.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies Enhanced Outpatient Program:</div> <p>Are all Enhanced Outpatient Program staff hired and in place?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

76.	Does the Principal (via the Academic Vice-Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with CDCR policy?	N/A	
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	N/A	
78.	<div>Multi-Agency Re-entry Program (SB 618):</div> Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?	N/A	
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A	
80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	
81.	<div>Vocational-Recidivism Reduction Strategies</div> Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?	N/A	
82.	Are all Recidivism Reduction Strategies vocational classes at full enrollment?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

NO.	INSTITUTION: VSPW DATE: May 190-23,2008 COMPLIANCE TEAM: John Delapp	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Descriptions:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all the of classroom files reflect TABE scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the CDCR Literacy Plan criteria and OCE TABE testing requirements?</p>	No	The Pre-Release and W-CALM classes do not administer the TABE.
3.	<p>Are all of the CDCR Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	No	128B chronological reports are issued instead of the 128E chronological reports required by policy. Several inmate clerk time cards (CDCR 1697s) were not started or completed.
4.	<p>Is 100% of the CDCR curriculum recording system in-use, accurate, and current?</p>	No	Some classes use in house recording system and not the CDCR /OCE competencies recording system.
5.	<p>Do 100% of the Permanent Class Record Cards (CDCR Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?</p>	Yes	However it must be noted that the education/SAP classes record only the half-day education attendance.
6.	<p>Are Certificates of Completion or Achievement being issued to those students earning them?</p>	Yes	
7.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> <p>Do all of the academic education classes have lesson plans that agree with the CDCR approved curriculum?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

8.	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	The high school classes are the only ones issuing required and elective credits. The other classes do not issue required or elective credits.
9.	Do all of the academic education classes have course outlines that agree with the CDCR approved curriculum?	Yes	
10.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Bridging Education Program Instructional Expectations:</div> Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?	Yes	The teachers were using the approved OCE Bridging Education curriculum.
11.	Are the TABE and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	Yes	All of the files had TABE scores; a very small percentage of the files had CASAS scores.
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (CDCR Form 151) that is up to date and accurate?	Yes	The PCR cards were current and up to date. However, all of the bridging classes were under quota. Given the current inmate population at VSPW all of the classes should be at full quota. There appears to be an inmate assignment issue.
13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	Yes	The teachers had written daily weekly schedules.
14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">TABE Testing Coordinator:</div> Are gain/loss reports (School Progress Assessment Report Card) and the TABE sub-test reports reviewed/shared with the education supervisors?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

15.	Do the TABE Coordinator and at least two others have access to a CDCR email address and user account?	Yes	They have access to the share drive to be able to download the database.
16.	Does the TABE Coordinator have the most recent TABE database (within a week)?	Yes	
17.	Are TABE testing protocols signed by current staff?	Yes	
18.	Are the TABE testing materials secured in a locked cabinet (mandatory standards)?	Yes	
19.	Is a master inventory of TABE test booklets and answer sheets maintained by the testing coordinator?	No	The audit team was unable to verify the existence of a master comprehensive computerized inventory. There is no inventory of the answer sheets. The TABE Coordinator needs to include an inventory of answer sheets to the computerized master inventory to account for all test materials including their location and current status.
20.	Is the TABE binder current and up-to-date with memos, purchase orders and instructions?	Yes	The TABE binder must be maintained with current and up-to-date memos, purchase orders and instructions. The staff were aware of the content of the latest memorandum
21.	Is the TABE locator test being used when needed to determine which level appropriate TABE test to administer?	No	The TABE coordinator indicated they have found that the inmates were memorizing the locator test resulting in inmates being tested in an inappropriate test level. They are now using an interview and an explanation of test level explanation before the inmates are tested and have seen a reduction of testing in the wrong level.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

22.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Teacher-TABE Testing</div> <p>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix?</p>	No	<p>All teachers are not testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not TABE testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers.</p>
23.	<p>Are the TABE tests administered according to the testing matrix?</p>	No	<p>TABE tests are not being administered by all teachers according to the testing matrix The Pre-Release and Women's Conflict and Anger Lifelong Management (W-CALM) classes are not testing. In the other classes the initial TABE testing is done by the TABE test coordinators. Follow up post testing is done by teachers.</p>
24.	<p>Is the TABE locator being used when needed to determine which level appropriate TABE test to administer?</p>	No	<p>The TABE locator test is not being used when needed to determine which level appropriate TABE test to administer.</p>
25.	<p>Are teachers using TABE pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?</p>	No	<p>The Pre-Release and W-CALM classes are not using the TABE pre-post subtest diagnostic reports for student needs assessment nor are they reviewing test scores with inmates.</p>
26.	<p>Are teachers using the TABE pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes?</p>	No	<p>The Pre-Release and Conflict and Anger Lifelong Management (W-CALM) teachers are not using the TABE pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting TABE score losses in their classes</p>

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

27.	Are current TABE subtests placed in student's file?	No	In at least one case the current TABE subtests is placed in a separate locked file instead of the student file.
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Alternative Education Delivery Models:</div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	No	There are no open line schedules for the Distance Learning Alternative Education Delivery Model. The teachers are coordinating and assisting inmates enrolled in primarily California Community College classes within a classroom services center setting.
29.	Are the Television Specialist and Distance Learning Study Teachers developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	No	There is no Television Specialist hired to date. The Distance Learning teachers that are coordinating primarily college programs are not using the education channel to deliver courses. However, a teacher is running Transforming Lives Network very successfully.
30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?	No	There is no Television Specialist and the Distance Learning teachers running primarily college programs are not using the education channel to deliver courses. However, a teacher is running the Transforming Lives Network very successfully including the use of Kentucky Educational Television videos.
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with OCE approved curriculum?	Yes	
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with OCE approved curriculum?	No	There are no Education/Work Program (half-time) classes.
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with OCE approved curriculum?	No	The Distance Learning classes do not have current course outlines and lesson plans that agree with OCE approved curriculum Distance Learning because the teachers are primarily coordinating college programs.
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with OCE approved curriculum?	Yes	
36.	<ul style="list-style-type: none"> Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' TABE subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? 	No	Teachers are not testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model programs (AEDM). AEDM teachers are not TABE testing students. It is recommended that the Comprehensive Adult Student Assessment System (CASAS) testing be required by policy from OCE for programs such as Alternative Education Delivery Models requiring 120 enrollment, Women's Conflict and Anger Lifelong Management, Bridging Education, Pre-Release, and other short duration or large enrollment programs.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

37.	<ul style="list-style-type: none"> Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? 	No	No evidence was found that AEDM rosters are given to the Vice Principal and Principal on at least a weekly basis.
38.	Are students' gains being recorded and tracked?	No	The Alternative Education Delivery Model programs requiring 120 enrollments do not have a formal measurement instrument/tool or system in place for all students.
39.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Do all of the academic life skills classes have current course outlines that agree with OCE/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM) (Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?</p>	Yes	
40.	Do all of the academic life skills classes have current lesson plans that agree with OCE/Gender Responsive Strategies approved curriculum?	Yes	
41.	<div style="border: 1px solid black; padding: 2px;">ESTELLE and Behavior Modification Unit programs:</div> <p>Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	N/A	
43.	<ul style="list-style-type: none"> Do ESTELLE students have access to computers as required in the framework of the program for training? Does the teacher have TABE scores on all of the students in the program? 	N/A	
44.	<div style="border: 1px solid black; padding: 2px;">COMPAS – Risk and Needs Assessment:</div> <p>Are assessment teachers conducting assessments on eligible inmates as defined by the current COMPAS Operations Manual?</p>	Yes	
45.	Does assessment staff utilize the current standardized COMPAS Tracking Form?	Yes	
46.	Are the COMPAS questionnaires shredded daily in accordance with the confidential document procedure?	No	The COMPAS teacher indicated it usually takes more than one day to complete the questionnaire. The incomplete questionnaires are locked in the assessment Office Technician's desk till they are completed and the data is entered into the computer. A shredder is located in their work area.
47.	Are assessment interviews conducted in a semi-private environment?	Yes	The teachers make sure no other inmates are within hearing distance when they are conducting an interview.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

48.	Is appropriate assistance provided to inmates during participation in the COMPAS assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	Yes	
49.	<div style="border: 1px solid black; padding: 2px;">Security and Order:</div> <p>Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?</p>	Yes	However, in one case the teacher had put the alarm away right before the interview.
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
51.	<div style="border: 1px solid black; padding: 2px;">Pre-Release</div> <p>Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?</p>	Yes	
52.	Do all of the Pre-Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	
53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	yes	
54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	No	The CDCR/OCE Pre-Release curriculum recording system is not in use. However, there are two in house tracking systems used.
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

56.	Is the Pre-Release class a full-time program (four days/8.5 hours or five days/6.5 hours)? If no, is there an exemption on file?	Yes	
57.	Are all of CDCR Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?	No	The CDCR Form 128E required by OCE policy to be used to record all education participation, including course completions, is not used. The CDCR Form 28B is used instead of the 128E contrary to OCE policy.
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	
59.	Does the Pre-release teacher provide OCE with monthly Pre-release Program reports on time and maintain copies of those monthly Pre-release program reports?	Yes	
60.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Recidivism Reduction Strategies Enhanced Outpatient Program: </div> Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?	N/A	
61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	N/A	
62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	N/A	
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

64.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Transforming Lives Network Program:</div> <p>Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.?</p>	No	Alternate modalities are not available for use within the housing units for the Distance Learning program. Alternate modalities such as, Kentucky Education Television videos, Transforming Lives Network satellite feeds/videos, institutional television, visual worksheets need to be developed and implanted within the housing units.
65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	No	There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	No	There is no Television Specialist. One candidate has been offered the job and is due to start July 1, 2008. There is no individual teacher access to the Transforming Lives Network broadcasting.
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	No	A system to give school faculty members the opportunity to provide input into the broadcast schedule has not been put in place.
68.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recreation/Physical Education (P.E.):</div> <p>Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?</p>	Yes	
69.	Does the Physical Education teacher follow the CDCR approved selection process for movies?	Yes	
70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	Yes	
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	Yes	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (CDCR Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	Yes	Officers keep the records for inmates who work for the Physical Education teacher.
76.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Recidivism Reduction Strategies (Physical Education): </div> Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?	Yes	
77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

NO.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Ron Callison, Beverly Penland	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Description:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all of classroom files reflect TABE scores that are not over six months old for students under the CDCR Literacy Plan and OCE TABE testing criteria?</p>	Yes	
3.	<p>Are all of the CDCR Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	No	<p>One of the program teachers is not completing 128E chronological quarterly reports. Some of the 128E chronological reports are inaccurate in reporting of the units completed each quarter.</p>
4.	<p>Is the curriculum recording system in-use, accurate, and current?</p>	Yes	
5.	<p>Does the Permanent Class Record Card (CDCR Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?</p>	Yes	
6.	<p>Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?</p>	No	<p>Teachers were unaware that elective credits could be issued.</p>
7.	<p>Are Trade/Industry Certifications being issued and recorded to those students earning them?</p>	Yes	<p>Several of the programs are working on be able to add additional industry certification to their programs.</p>
8.	<p>Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

9.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> <p>Do all of the vocational education classes have course outlines that agree with the CDCR curriculum?</p>	No	Most of the program teachers do not have course outlines of their programs.
10.	Do all of the vocational education classes have lesson plans that agree with the CDCR curriculum?	Yes	
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	Yes	
12.	Are Vocational Instructors conducting and documenting at least four hours of approved related formal classroom training each week for all inmate students?	Yes	
13.	Are all of the vocational programs that have a nationally recognized certification programs participating in that program?	Yes	
14.	<div style="border: 1px solid black; padding: 2px;">Recidivism Reduction Strategies:</div> <p>Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?</p>	N/A	
15.	<div style="border: 1px solid black; padding: 2px;">National Center for Construction Education and Research:</div> <p>Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?</p>	Yes	
16.	Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

17.	Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?	Yes	
18.	Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?	Yes	
19.	Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?	Yes	
20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	
21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to OCE within 60 days?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">TABE Testing</div> Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the TABE matrix?	Yes	Students are assigned to an academic class where they are interviewed and administered the TABE. They are then recommended for an education assignment. They are then assigned as a class opening becomes available.
29.	Are the TABE tests administered according to the testing matrix?	Yes	The TABE coordinator sends a list of students who need to be post-tested and the teacher administers the TABE post-test.
30.	Is the TABE locator being used, when needed, to determine which level appropriate TABE test to administer?	No	The Teachers do not administer the initial test. The TABE coordinator identifies the appropriate post test level.
31.	Are teachers using TABE pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

32.	Are teachers using the TABE test results as a diagnostic tool for individualized instruction and trouble shooting TABE score losses in their classes?	Yes	
33.	Are current TABE subtests placed in student's file?	Yes	
34.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with OCE/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?</p>	No	All of the teachers have not received Gender Responsive Strategies training and do not have course outlines reflecting the Gender Responsive Strategies curriculum.
35.	Do all or more of the vocational classes have current lesson plans that agree with OCE/Gender Responsive Strategies approved curriculum?	No	Gender Responsive Strategies have not been incorporated into the program lesson plans.
36.	<div style="border: 1px solid black; padding: 2px;">Security and Order:</div> <p>Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?</p>	Yes	
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	Yes	
39.	Is at least one hour per month of safety meetings being held and documented?	Yes	
40.	<div style="border: 1px solid black; padding: 2px;">Trade Advisory Committee:</div> <p>Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly?</p>	No	Some of the vocational programs do not a Trade Advisory Committee or attend or conduct any Trade Advisory Committee meetings.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

41.	Job Market Analysis: Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	No	Some programs did not have a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey to share with their students.
42.	Apprenticeship: Is there an active Apprenticeship Training Program?	N/A	
43.	If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	
45.	Employee and Community Services Programs. If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?	Yes	
46.	If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

NO.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Christine Long	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Library Staffing:</div> <ul style="list-style-type: none"> Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff? Does the Senior Librarian implement/plan the library program? 	Yes	An Academic Vice-Principal supervises the library staff. The Senior Librarian implements the library program.
2.	<div style="border: 1px solid black; padding: 2px;">Department Operations Manual and Department Operations Manual Supplement:</div> <ul style="list-style-type: none"> Is the current Department Operations Manual, Section 53060 available in the main libraries and satellite libraries? Is there a Department Operations Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operations Manual supplement reflect the current, actual local library program? 	Yes	The Library and Law Library Department Operation Manual supplement is due for revision May 2008.
3.	<div style="border: 1px solid black; padding: 2px;">General Population (GP) Access Hours:</div> <ul style="list-style-type: none"> Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours? Do General Population inmates have regular access to non-legal library services? 	Yes	The library hours are posted on the windows of the front and back doors and are posted in each of the housing units. Evening hours are available on Tuesday, Wednesday, Thursday, and weekend hours on Saturday. Actual access depends on yard release. The library by custody staff.
4.	<div style="border: 1px solid black; padding: 2px;">General Population/Law Library Documentation:</div> <ul style="list-style-type: none"> Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use? Is there a list showing inmates who request legal access, and those who received access? 	Yes	Requests are collated and stapled by date dictated. Database of verified legal deadlines updated as requests are received and verified by library staff.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

5.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Restricted Housing Status Inmate Access:</div> <ul style="list-style-type: none"> • If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library? • Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request? 	Yes	Procedures for providing physical access to restricted housing inmates are included in the library program Department Operation Manual supplement.
6.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Restricted Housing Status Non-Legal Library Services:</div> <p>Do Restricted Housing inmates receive general library services?</p>	Yes	Inmates submit a request for the books. If available, the Library Technical Assistant from A facility will deliver books to Administrative Segregation /Security Housing Unit. There is a need for more titles.
7.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Library Expenditures:</div> <ul style="list-style-type: none"> • Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? • If other items are purchased, are they for library use? 	Yes	
8.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Welfare Funds (IWF) Expenditure:</div> <p>Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?</p>	Yes	There is a question as to why the purchase of some ethnic magazines was denied (i.e. Ebony, TV Novelas)

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

9.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Law Library Expenditure:</div> <ul style="list-style-type: none"> Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room? Are the Stock Received Reports completed and submitted to the Regional Accounting Office? 	Yes	
10.	<ul style="list-style-type: none"> Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Data System computer? Are the law books shelved promptly? 	Yes	
11.	<ul style="list-style-type: none"> Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them? 	No	The Warehouse notifies the Senior Librarian who picks up the discs and then loads them on to the computers.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	
13.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Library Book Stock - Quality, Part I:</div> <ul style="list-style-type: none"> Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years.) Does the library program have at least three directories relevant to the questions asked by the population served? 	No	The encyclopedia is dated 2001, a new one was recently ordered. The unabridged dictionary is a 1993 edition. The Senior Librarian will purchase a new one with reduced recidivism funds. The library has a 2008 Directory of Attorneys, 2006 Headquarters USA, 2006-2007 Washington Info Directory Information directory

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

14.	Library Book Stock - Quality, Part II: Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?	No	The Main library has a 2007 World Almanac; the atlases are more than three years old. The libraries maintain dictionaries within age limits.
15.	Library Book Stock - Quality, Part III: <ul style="list-style-type: none"> Does each library regularly inspect the physical condition of their books? Does the library program have a book repair procedure 	Yes	
16.	Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity: Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?	No	The Facility A library collection is lacking adequate titles.
17.	Library Book Stock - User Orientation: <ul style="list-style-type: none"> Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box? 	Yes	The Senior Librarian regularly reviews inmate suggestions for purchases. The Senior Librarian has begun to attend the Site Literacy meeting, meets with the Women's Advisory Committee, and has one Library Clerk who is the library representative for the Inmate Education Advisory Committee.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

18.	Library Book Stock - Quantity: (Department Operations Manual Book Aug) <ul style="list-style-type: none"> Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding? 	Yes	
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	Yes	Year One titles have been processed and shelved. Purchases for Year Two funding are being prepared.
20.	Book Access: <ul style="list-style-type: none"> Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? 	No	The library uses the Follett automated circulation system. Staff performs circulation duties. Inmates are not allowed to use the circulation computer - institution policy. There is no Interlibrary Loan process in place.
21.	Circulation: <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	No	The Advantage Plus update to the circulation system can now only be accessed through the Internet. There is an adequate overdue system.
22.	Mandated Law Library/California Code of Regulations, Department Operations Manual <ul style="list-style-type: none"> Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual? Are all the Law Library Electronic Data System computers up-to-date and operating in each library? 	No	The library has begun to receive printed updates but has a break in some editions. The library has not received Law Week yet. Bulletin boards are mounted in each library to display revisions, etc.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

23.	Law Library - American Disability Act (ADA): Are American Disability Act mandatory postings present in the library?	Yes	
24.	Circulating Law Library: Is a procedure for accessing the Circulating Law Library in place?	No	The library has an agreement with the Madera County Law Library to obtain needed books to photocopy the requested cases.
25.	Court Deadlines: Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	Inmates with court deadlines are required to complete a Request for Verification of Court Deadline and to submit a copy of their court document. A database is kept of priority users.
26.	Law Library Forms and Supplies: Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	
27.	General Library Forms and Supplies: Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	Yes	
28.	Inmate Clerk Training: <ul style="list-style-type: none"> Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? 	No	The current law library clerks received training from a previous law clerk that was a trained paralegal. Staff provides initial training in general library processes. Print materials are available on the procedures for book repair.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

29.	<div data-bbox="164 254 914 300">Security and Order:</div> <ul style="list-style-type: none">• Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms?• Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
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COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
1.	Duty Statement/Job Description/Credentials – Literacy Learning Lab Do you have a current duty statement on file (within one year)?	Yes	Mr. Steve Culver is an outstanding Literacy Learning Lab teacher.
2.	Do you have a valid credential on file?	Yes	Valid credential in Education Office.
3.	Security/Order – Literacy Learning Lab Are personal alarms issued by the institution to teaching staff and worn?	Yes	Mr. Culver also has a whistle.
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	Exit sign is above the door with the evacuation plans on the left side of the door.
5.	Supervisory/Support – Literacy Learning Lab Do you receive support from your supervisor and other educational staff?	Yes	Good support from Mr. Connolly, SAI.
6.	Does the Vice Principal visit/observe your class? Does the Principal visit/observe your class? Do you maintain a sign-in log?	Yes Yes Yes	Mr. Connolly visits three to four times a week. Mr. Patrick visits rarely.
7.	Inmate Enrollment – Literacy Learning Lab Do you maintain a minimum enrollment of 27 students?	Yes	Twenty-seven students for 6.5 hours per day.
8.	Do students receive direct/group instruction?	Yes	Group work on board and in packets covering all subject areas.
9.	Is the Literacy Learning Lab a "self contained" program?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

10.	Student Records/Testing Achievements – Literacy Learning Lab Do you verify non-General Education Development or non-High School graduation of the student?	Yes	Mr. Culver checks with the GED Coordinator to verify the GED or High School Diploma.
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	Yes	Mr. Culver begins the student file immediately upon entering the Plato Lab
12.	Does each student have a current TABE score? <i>If not, do you refer the student for testing?</i>	Yes	TABE and CASAS scores current. If student's TABE score is not current Mr. Culver will test student.
13.	Do you assess student's basic skill level? <i>Describe</i>	Yes	Teacher interviews student and has the student read orally to determine reading level.
14.	Are at least 90% of the CDCR Form 128E chronological reports, classroom records and accountability documents current, accurate and secured?	Yes	All student files are current, accurate, and secured in locked cabinet.
15.	Are the Student Files current (incl. TABE scores and any other assessment scores)? <i>Review</i>	Yes	All scores are current.
16.	Is there a current Student Job Description on file?	No	The Federal Education Grievance Procedure policy is not included in Student Job Description. Memo dated June 23, 2006.
17.	Instructional Expectations – Literacy Learning Lab Do you use the approved CDCR Competency Based Adult Basic Education curriculum?	Yes	Incorporated in group work and packets.
18.	Are differentiated instructional methods used? <i>Describe</i>	Yes	Group and peer learning.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

19.	Do students track their own progress?	Yes	Students receive assignment work weekly and they track their PLATO progress from the software.
20.	Do the students receive computer orientation? Is there continuous training? Describe	Yes Yes	The teacher does the orientation and on going training, if needed, with each new student.
21.	Do you maintain course outlines and lesson plans? Review files	Yes	Outstanding outlines and lesson plans daily and weekly. Competencies are checked off.
22.	Do you use alternative assessment instruments (besides the required TABE), to determine a student's instructional plan? Describe	Yes	Teacher generates reading and math quizzes for student assessment.
23.	Do students spend an average of six months of instructional time enrolled in the program?	Yes	Six months is the average stay.
24.	<div style="border: 1px solid black; padding: 2px;">Other Services – Literacy Learning Lab</div> Do you refer students to other services, i.e. medical? Describe the process	Yes	Teacher would contact medical, only if necessary.
25.	Do you provide the students career-related information?	Yes	Job related activities, goal setting and other life skills such as the PLATO software.
26.	Do you have student aides? If so, how many and how are they used?	Yes	One student aide. She provides tutoring and clerical support for the Literacy Learning Lab.
27.	<div style="border: 1px solid black; height: 1.2em; width: 100%;"></div> Have you participated in conferences, workshops and seminars from July 1, 2007–December 31, 2008? If so, provide a list.	Yes	Reading Plus training in August, 2007, for new software program.
28.	<div style="border: 1px solid black; padding: 2px;">Expenses – Literacy Learning Lab</div> Are spending levels appropriate for material purchases and training to support program needs?	Yes	Mr. Culver is satisfied with the spending levels.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

29.	Equipment – Literacy Learning Lab Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? Conduct an inventory	No No	This Literacy Learning Lab has new computers. PLATO has not been out to open the upgrades. Mr. Culver has tried to make arrangements, but PLATO has not responded.
30.	Is your software appropriately maintained by PLATO's technical field staff?	Yes No	Mr. Culver is very happy with the PLATO software. However he would like to have the upgrades installed. The Reading Plus software is not installed. CCWF received the software program in August, 2007.
31.	Do you register all new software purchases with the Associate Information Systems Analyst?	Yes	The AISA is aware of all software used in the Literacy Learning Lab.
32.	Committees/Meetings – Literacy Learning Lab How often do you meet with the referral teacher for consultation on a student?	N/A	
33.	CASAS/TOPSpro Management Information System (MIS) Coordinator Have you been trained in the area of California Accountability and the TOPSpro Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? Dates of last trainings	Yes Yes	Ms. Deanna Maddock attended the April, 2008 and the October, 2007 TOPSpro training conducted by the WIA Administrator. She also attended the 2007 CASAS Summer Inst.
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? Explain the CASAS testing procedures at your institution.	Yes	VSPW has an adequate amount of testing materials. Sign-out and Sign-in sheet is used to track test booklets.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	Yes	Locked in cabinet in secured Testing Office.
36.	Are you using the latest version of the TOPSpro Management Information System software?	No	TOPSpro version 4.55. Two upgrades have been sent out since this version.
37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	Yes	The scanner works well. The computer was just upgraded from NT to XP.
38.	Do you provide each teacher with a Student Performance by Competency Report to assistance them in preparing lesson plans?	Yes	Competency Reports for Students and Class. Student Gains by Class Report.
39.	Do you know how to generate the California Payment Point Report? Can you generate a Preliminary Payment Point Report?	Yes Yes	After each scanning to keep tabs on student progress for teachers. Assist Coordinator with data cleaning.
40.	Are the appropriate students receiving and completing the Core Performance Surveys? <i>Explain the process in place to ensure that students are receiving the surveys.</i>	Yes	If the ex-student is still at the institution the CASAS Coordinator locates student to complete survey via the mail and submit to the WIA Administrator.
41.	Can you generate an up to date list of students that will be receiving the Core Performance Survey for the past quarter?	Yes	Third Quarter data showed "No Student Qualified". CASAS Coordinator would locate ex-student to have them fill out survey.
42.	Can you generate a Data Integrity site review?	Yes	Data Integrity Report is used for assisting Coordinator to locate errors in the data.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

43.	Can you generate a Student Gains by Class Report? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	Yes Yes	This report is given to the teachers to account for the students learning gains. All records matched. Ms. Maddock is a dedicated CASAS Coordinator
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COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

No.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Tom Posey	Yes/No or N/A	COMMENTS
1.	Does the Incarcerated Youth Offender Teacher have a copy of the current Incarcerated Youth Offender Grant?	Yes	
2.	Is there a signed Incarcerated Youth Offender Enrollment Agreement on file for each participant?	Yes	
3.	Is there evidence on file that each participant graduated from high school or passed the General Education Development exam?	Yes	
4.	Is there a Participant Demographic/ Biographic information sheet on file and, that his/her portfolio has been started?	Yes	
5.	Does the Incarcerated Youth Offender Teacher use CAPS, COPS AND COPES to identify inmate job skills?	Yes	
6.	Are the results of CAPS, COPS AND COPES assessment on file?	Yes	
7.	Does the Incarcerated Youth Offender Teacher Identify inmate jobs indexed to skills?	Yes	
8.	Does the Incarcerated Youth Offender Teacher provide job counseling and job resumes for participant?	Yes	
9.	Does the Incarcerated Youth Offender Teacher provide academic and vocational training courses for participants?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

10.	Does the Incarcerated Youth Offender Teacher track success of Incarcerated Youth Offender participants after parole?	Yes	
11.	Does the Incarcerated Youth Offender Teacher provide services to prisons in surrounding areas?	Yes	
12.	Does the Incarcerated Youth Offender Teacher use the Internet, phone and fax to establish contact with Parolees?	Yes	
13.	Does the Incarcerated Youth Offender Teacher meet at least once on a quarterly basis with active participants in Incarcerated Youth Offender?	Yes	
14.	Does the Incarcerated Youth Offender Teacher indicate in Incarcerated Youth Offender database why inmates have declined or dropped from the Incarcerated Youth Offender program?	Yes	
15.	Does the Incarcerated Youth Offender Teacher communicate and maintain rapport with Vocational and Academic teachers?	Yes	
16.	Does the Incarcerated Youth Offender Teacher prepare and submit reports to the Incarcerated Youth Offender Program Coordinator via memos and the Incarcerated Youth Offender database?	Yes	
17.	Does the Incarcerated Youth Offender Teacher attend training, Incarcerated Youth Offender quarterly meetings and pertinent conferences?	Yes	
18.	Does the Incarcerated Youth Offender Teacher maintain a hard file for each active/inactive or former participant and participant parolee?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

19.	Does the Incarcerated Youth Offender Teacher's hard copy file contain assessment information, enrollment and tuition agreements, evidence of General Education Development or high school completion, contact information and relevant chronological documentation?	Yes	
20.	Does the Incarcerated Youth Offender Teacher's hard file and database information are consistent and in agreement with each other?	Yes	
21.	Does the Incarcerated Youth Offender Teacher ensure that the inventory sheet is up to date; all equipment is clearly marked and identified with Incarcerated Youth Offender inventory tags?	Yes	
22.	Does the Incarcerated Youth Offender Teacher work with contracted vendors to help with the successful transition from prison to parole?	Yes	
23.	Does the Incarcerated Youth Offender Teacher check to ensure transfers from other Incarcerated Youth Offender institutions still meet eligibility requirements?	Yes	
24.	Does the Incarcerated Youth Offender Teacher ensure that only the Incarcerated Youth Offender Representative uses Incarcerated Youth Offender equipment?	Yes	
25.	Does the Incarcerated Youth Offender Teacher use Offender Based Information System to update the candidate pool on a monthly basis?	Yes	
26.	Does the Incarcerated Youth Offender Teacher Issues trust withdrawals for any materials or equipment loaned to participants?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

27.	Does the Incarcerated Youth Offender Teacher maintains all information for each participant in the Incarcerated Youth Offender database and is it current and up to date to include, but not limited to, the following database fields (minimum fields to be completed)?	Yes	
a.	CDCR #;First and Last name	Yes	
b.	Earliest Possible Release Date; Date Of Birth	Yes	
c.	Date Enrolled in the Incarcerated Youth Offender program	Yes	
d.	Participant Notes if applicable	Yes	
e.	Program Exit Code if applicable	Yes	
f.	Program Exit Date if applicable	Yes	
g.	Parole Region, Unit and County if known	Yes	
h.	Training programs recorded as a separate record and corresponding tuition agreement in participant's file	Yes	
i.	Program Name; Entry Date; Completion Date; Early Exit Date and Reason (if applicable); notes on status of course/course completion, earned grade etc. in Training Placement record	Yes	
j.	Expense Date; Amount; Training Provider; Training Program; Participant Name; CDCR Number and applicable notes	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

k.	Incarcerated and post incarcerated address noted and recorded as separate records in Location Info.	Yes	
l.	Uses DDPS disk to update Incarcerated Youth Offender database	Yes	
m.	Has internet access; uses internet as resource for employment and other transitional information for participant	Yes	
n.	Sends and receives changes to Incarcerated Youth Offender database to Headquarters within 24 hours of receiving update disk from Headquarters.	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: VSPW DATE: May 19-23, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Inmate Enrollment</div> <p>Is the class meeting OCE required enrollment quota?</p> <p>(Note the actual enrollment in the comments section).</p>	Yes	<p><i>Quota: 216</i> <i>Enrollment: 216</i></p> <p><i>27 students per each of the eight instructors.</i></p>
2.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Equipment Inventory</div> <p>Is the Vocational and Technical Education Act equipment properly tagged?</p> <p>(Note the condition of equipment in the comments section).</p>	Yes	<p><i>Condition of equipment: All equipment is in good condition.</i></p>
3.	Is Vocational and Technical Education Act equipment used for the intended purpose?	Yes	
4.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Student Records/Testing Achievements</div> <p>Are course completions being issued for OCE program training requirements?</p> <ul style="list-style-type: none"> ▪ How many students are trained per year? <p>(Note the number of students trained per year in the comments section).</p>	Yes	<p><i>Number of students trained per year: 597.</i></p> <p>AR/EPA, NCCER, and C-Tech. Other shops working on CSS, PAP & OPESA</p>
5.	Do Student files verify equipment training on CDCR Form 128E?	Yes	
6.	Is OCE-approved curriculum and recording system in use?	Yes	
7.	Are lesson plans in accordance with OCE guidelines?	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

8.	Related Training Is safety and literacy training taking place in accordance with OCE guidelines?	Yes	
9.	Vocational Classroom Physical Access Are students able to get physical to the vocational shops over 50% of the time? (Note the "X" and "S" time for the last two prior months).	Yes	<i>Month 1/X=18,180 S=9,400</i> <i>Month 2/X=16,704 S=7,539</i> The majority of "S" Time is due to late release by custody.
10.	Trade Advisory Committee Are quarterly meetings held and minutes kept? <i>(Note the Number of Trade Advisory Committee members, number in the comments section).</i>	No	Number of TAC members: 45 The only exception is that the Air Conditioning and Refrigeration TAC member refused to come into the prison and instructor was told that TAC members had to come in since the Instructor is not allowed top go out to the community.
11.	Supplemental Areas (not counted for points on the overall Compliance Review) Apprenticeship: <ul style="list-style-type: none"> ▪ Number of apprentices_____ ▪ Institutional Pay_____ ▪ Union/Company Affiliation_____ _____ ▪ Current DAS Form_____ ▪ OJT Work Logged_____ ▪ Less than 5 years_____ 	N/A	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

12.	Is the shop clean? (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	
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CORRECTIVE ACTION PLAN
ACTION SOURCE: Education Compliance Review
June 16-23, 2008



Education Compliance Branch

Raul Romero
Associate Superintendent

G. Lynn Hada
Principal

Beverly Penland
Vice-Principal

Follow Up Compliance Review Visit

January 13-14, 2009

Valley State Prison for Women



KENT EICHENBERGER, Warden (A)



VSPW CAP Comparative Overview

297(Revised to 295 during this visit- 2 NAs) education items were reviewed during the original on site visit. The results of the review noted 230 items in compliance with 58 not in compliance resulting in an **Overall score of 80%**.

Upon review of the Corrective Action Plan (CAP) it was found that two questions in the administrative section were not addressed in the CAP and are not in compliance, also two questions in the academic section were combined with another question and were also not in compliance.

Following this current Corrective Action Plan Review, 44 additional items are now in compliance and 13 items remain not in compliance resulting in a **new overall score of 96%**

CONGRATULATIONS: VSPW has improved to an education operation total score of:

96%

0

Please continue to work on the 13 remaining items that are not in compliance. Please keep me informed via email on any progress made or roadblocks encountered.

Sincerely,

Raul D. Romero
Assistant Chief
Office of Audits and Compliance
Education Compliance Branch

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
EDUCATION ADMINISTRATION SECTION						
#6	<p><i>Are law library purchases funded by the institution's general budget?</i></p> <p>The law library purchases are not being funded by the institution's general budget.</p>	Ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs Headquarters Staff.	Designation of Law Library expense responsibilities are within VSPW's, Principal's and OCE's purview.	CDCR headquarters, including institutional Program 25 and Program 45 budget allocations, are responsible for this. The Principal will maintain lines of communication w/OCE on a monthly basis to track progress and resolution on this issue.	Unknown. To be decided by headquarters and VSPW's Principal.	<p>NOT APPLICABLE.</p> <p>This item is no longer applicable to the institution. The Gilmore Collection vs. Lynch purchase responsibility has been assigned to the Division of Education, Vocations, and Offender Programs/Office of Correctional Education. Financial Information Memo 2006-04 dated August 11, 2006 and Expenditure PCAs FY 2008/09 identifies both Recreational Library and Law Library as Program 45 allotment monies. The Department of Corrections and Rehabilitation Agency Secretary Matt Cate and the Office of Court Compliance staff have been briefed by the OCE Superintendent on the Library/Law Library funding/purchase issue that is being resolved at the Headquarters level.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

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January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#8	<p><i>Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?</i></p> <p>The Education Monthly Report (EMR) and the Education Daily Report (EDR) is not accurate. There are several areas that are in need of improvement. It is recommended that the VSPW Education Department work with OCE to correct errors</p>	<p>It is recommended that VSPW Education Department work with OCE to correct any discovered errors in VSPW's EMR. To the best of VSPW local education administration's knowledge, there are no errors on the EMR. Information is as accurate as possible. Should any specific errors be discovered, they will be corrected. Though this is a criticism by the auditors, no specific errors were identified that needed correction.</p>	Principal	<p>The Principal will contact Danh Truong, SSA at OCE, to ensure that the new EMR template is being utilized, that internal formulas are corrected and review EMR counting rules to ensure accuracy. Principal will ensure that EMR training is provided to the staff member who is completing the EMR.</p>	Completed and ongoing monthly.	<p>NOT IN COMPLIANCE</p> <p>The available November 2008 EMR has the following error examples:</p> <p>A) Page 1, Section E, "Percentage (%) of average daily attendance" is noted in error as 101%. The same error appeared during the May 2008 review in addition to other errors...</p> <p>B) Page 4 indicates that there are four Independent Study Teachers and two Distance Learning Teachers (one position is vacant) with no quota and no capacity and page 8 also shows no students for Independent Study and Distance Teacher.</p> <p>C) Page 9 shows the laudable 51 inmate literacy tutors but the inmate participants count is not noted.</p> <p>The OCE is still working with institutions in providing clarity through "counting rules". The data in the EMR must be accurate since it directly impacts COMSTAT data. It also impacts the DEVOP/OCE Performance Accountability and Improvement Process.</p>

VALLEY STATE PRISON FOR WOMEN

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Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#16	<p><i>Are all staff appropriately working and/or assigned within the education program?</i></p> <p>There are two teachers coordinating college programs contrary to OCE policy and general funding for Adult Basic Education requirements. There are also two teachers assigned to handle the education testing process that are not identified by OCE as approved positions for that specific purpose.</p>	OCE has identified two testing positions for VSPW, one for general population and one for the Reception Center	Principal, Associate Superintendent.	Principal to ensure that at least 50% of college enrollments are also actively seeking HS Diploma or GED. Work with OCE to establish post-secondary coordinator positions. Also, EMR created by OCE incorporates college enrollments and completions, therefore creating the impression that college enrollments are expected. Per M. Free, Associate Chief, OCE, Principal may assign teachers to other duties with approval of Associate Superintendent. (Permission to place Independent Study teachers over (2) college programs was not obtained by Assistant Superintendent.)	<p>Independent Study post-secondary teachers to have min. 50% HS Diploma/GED enrollment by September 30, 2008.</p> <p>Positions to be assigned as post-secondary coordinators dependent upon headquarters.</p>	<p>NOT IN COMPLIANCE</p> <p>The Independent Study teachers are still coordinating college programs contrary to OCE policy.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
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January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#27	<p><i>Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure?</i></p> <p>The education and work program model is not in place as agreed upon on the approved signed AEDM CCPOA agreement.</p>	Clarify that VSPW was never required to implement this plan, only to explore this option. Also, VSPW has successfully implemented the other three AEDM models, which are viable in this environment.	Principal, Associate Superintendent.	Modify AEDM to reflect the actual models which are workable at VSPW.	Complete	<p style="text-align: center;">IN COMPLIANCE</p> <p>The SAP/Education Program is identified as the Education/Work AEDM Model.</p>
#30	<p><i>Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?</i></p> <p>The college distance education programs models are not approved.</p>	See #16	Principal,	Principal to ensure that at least 50% of college enrollments are also actively seeking HS Diploma or GED	September 30, 2008.	<p style="text-align: center;">NOT IN COMPLIANCE</p> <p>The Independent Study teachers are still coordinating college programs contrary to OCE policy.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

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Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#31	<p><i>Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted?</i></p> <p>The AEDM Distance and Independent Study staff is not meeting the maximum 120 students quota per each teacher requirement</p>	Monthly Report format created and maintained by OCE. April 2008 monthly report for VSPW indicates 510 students enrolled in college, 496 students enrolled Independent Studies, 225 Students enrolled in Distance Learning, 270 students enrolled in half-time Education programs.	Principal & OCE	Clearly, enrollment requirements are being met. If report format is issue, then OCE must resolve. Principal to ensure each AEDM Teacher has required quota & it is accurately reported. If required quota not maintained, these numbers could become labor and legal issues.	Complete	<p>NOT IN COMPLIANCE</p> <p>The VSPW EMR for December 2008 shows only 187 inmates participating in AEDM programs run by five Independent Study teachers. The required student quota per teacher is 120. The five Independent Study Teachers should carry a total of 600 students.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

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Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#46	<p><i>Do academic, vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?</i></p> <p>The Education Monthly Report and other available enrollment/participation rosters for the Distance Education and Independent Study models did not provided sufficient evidence to confirm 120:1 quotas are being met.</p>	See #31. Also, enrollment/participation rosters are available in Principal's office, and were available during Compliance Review.	Compliance Review Team	Compliance Review Team to ask to see documents.	N/A	<p>NOT IN COMPLIANCE</p> <p>The VSPW EMR for December 2008 shows the Distance Education teacher with 127 students. The student load is 7 students higher than the 120 maximum students to teacher ratio in the AEDM Distance Education SEIU Local 1000 agreement.</p>
#47	<p><i>Has the Institution developed an eligibility list for assigning inmates to the Bridging Program?</i></p> <p>A specific BEP eligibility list could not be obtained. It is most likely that there is a list but none has been made available to the Education Department to date.</p>	It is recommended to confirm such a list is available.	BEP VP	BEP VP to obtain list from Inmate Assignments Office.	Complete	<p>NOT IN COMPLIANCE</p> <p>There is no specific Bridging Education Program (BEP) Eligibility List is produced at VSPW. All inmates assigned to the General Population BEP are taken from the VSPW Support Services List.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
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January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#58	<p><i>Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports?</i></p> <p>A review of student education files indicated lack of appropriate required documentation and processing.</p>	It's recommended that all education files be examined by education supervisors for appropriate content and involvement of inmate clerk assistance be reviewed and discussed with OCE to ensure they don't handle education files containing confidential information as denoted on the OCE memo addressing the education files processing.	Principal, Vice-Principals	Principal and VPs to review files and confidentiality issues, and ensure process is in compliance.	Complete VSPW's education filing system is currently in compliance with all OCE education file requirements. There will be ongoing quality control checks by supervisors to ensure that education files are complete and that I/Ms are not permitted to handle any confidential educational information.	<p>NOT IN COMPLIANCE</p> <p>The TABE chronological reports and TABE scores are accessible to Inmates contrary to OCE Education Confidential Information Policy.</p> <p>It is recommended that the Principal requests that the OCE Superintendent provide any specific updated written guidelines identifying what is considered confidential and specifically what inmates clerks can handle regarding documents that go in the Education Files.</p> <p>Existing policy does prohibit inmate clerks from handling student reports containing educational assessment information.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
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January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#59	<p><i>Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is the original copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the RC and transferred to the GP receiving institution?</i></p> <p>A review of student education files indicated lack of appropriate required documentation and processing.</p>	It is recommended that all education files be examined by education supervisors for appropriate completeness on an ongoing basis.	See #58 Principal, Vice- Principals	Principal and VPs to review education files on an ongoing basis.	Complete VSPW's education filing system is currently in compliance with all OCE requirements. There will be ongoing quality control checks by supervisors to ensure that I/Ms are not permitted to handle education files	<p style="text-align: center;">IN COMPLIANCE</p> <p>VSPW now is including copies of the CDCR 154 (Official Student Transcript Record) when student transfers or paroles. VSPW is also maintaining copies of the 154.</p> <p>It is recommended that at a minimum, VSPW Education Department continue to keep a copy of the CDCR 154 on file when inmates that participate in education programs transfer or parole.</p> <p>There is ongoing discussion regarding the need to maintain records both at the local level and at the Office of Correctional Education.</p> <p>There is an attempt to align CDCR student records to meet California Education law that requires schools to maintain copies of school academic record (transcript) for five years and the school district office to keep those records in perpetuity.</p> <p>Current student record keeping is not effective or useful to students paroling or seeking attendance in public adult schools, community colleges, universities or trade schools.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#61	<p><i>Are literacy programs available to at least 60% of the eligible prison population?</i></p> <p>It was not possible to establish the factual percentage since the Education Monthly Report indicates 103% and the inmate eligible count appears lower that it may be. In addition, there is only one TV broadcast channel, not TV Specialist available to date and the activation and availability could not be confirmed. However, the VSPW Education Department is commended for having over 40 inmate tutors. It is recommended that the VSPW Education Department work with OCE to clarify exactly what percentage of the eligible population is being served.</p>	<p>It is recommended that the VSPW Education Department work with OCE to clarify exactly what percentage of the eligible population is being served. The monthly report format and formulae are created by OCE. The figures entered by VSPW Education are accurate; the 103% of eligible inmates served figure is derivative, and may not be altered in the field. Broadcast channels should be increased. TV Specialist being hired.</p>	<p>Principal OCE Principal Local Admin.</p>	<p>Principal to work with OCE to utilize the new EMR template to remediate reoccurring errors related to internal formulas. The new EMR format will produce the appropriate percentage.</p> <p>New TV Specialist scheduled to start on July 1, 2008. Principal to work with TV Specialist and local administration to develop a plan to increase TV channel availability.</p>	<p>Partially complete. TV Specialist hired July 1, 2008 Currently working with OCE to rectify derivative calculations in EMR format. Once the new TV equipment is installed, the feasibility of adding additional broadcast channels will be explored.</p>	<p style="text-align: center;">IN COMPLIANCE</p> <p>The December 2008 Report shows more than 74% of inmates participate in Literacy Services exceeding the Penal Code 2053.1 and CDCR Literacy Implementation Plan requirements.</p>

VALLEY STATE PRISON FOR WOMEN
Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
 Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
 January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
ACADEMIC EDUCATION SECTION						
#2	<p><i>Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?</i></p> <p>The Pre-Release and Calm classes do not test. 128B's instead of 128E's issued.</p>	CALM and Pre-Release teachers to begin issuing 128Es. CALM and Pre-Release do administer CASAS tests. Per R. McClanahan, OCE TABE Coordinator, class durations too brief to administer reliable and valid pre and post TABE tests.	CALM and Pre-Release teachers, Academic Vice-Principals	CALM and Pre-Release teachers will receive training on appropriate completion of 128E certificates. Clarification on TABE testing of short-duration courses to be provided by OCE. Pre and post CASAS tests are currently being administered to these students to measure student progress and gains pending resolution of TABE testing issues involving brief duration specialty programs, i.e., CALM and Re-Entry	Partially Complete. Awaiting written authorization from OCE to exclude short-term classes from TABE testing mandates.	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#3	<p><i>Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</i></p> <p>Several inmate clerks' 1697's were not started or completed.</p>	Train staff on daily completion of 1697 forms inmate workers.	Vice-Principals to train staff.	Vice-Principals will provide IST during the upcoming training days. VPs will conduct spot checks of 1697 forms during each month and final review at end of month	Completed on June 4, 2008. Spot checks are ongoing	IN COMPLIANCE
#4	<p><i>Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?</i></p> <p>Some classes use in house recording systems and not the CDCR/OCE competencies recording systems.</p>	Staff will be trained to use office CDCR/OCE competency recording formats.	Vice-Principals to train staff.	Vice-Principals will provide IST during the upcoming training days. VPs will ensure recording systems in place and in use as part of routine classroom observations.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#8	<p><i>Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?</i></p> <p>The High School Classes are the only ones issuing required and elective credits. The other classes do not issue required or elective credits.</p>	Per OCE policy, High School programs are <i>not</i> a mandated program, and exist only at the discretion of the Principal and Associate Superintendent. Therefore, other classes are <i>not</i> required to issue elective credits. (See May 21, 2008 memo and June 2000 policy)	N/A	N/A	N/A	<p>NOT IN COMPLIANCE</p> <p>There is ongoing discussion regarding the issuance of credits for education work completed by students both at the local level and at the Office of Correctional Education.</p> <p>The fact that teachers are credentialed and VSPW is accredited allows VSPW to issue required credits as well as elective credits.</p> <p>VSPW is commended for issuing required credits for those inmates that participate in the high school program.</p> <p>The normal function of any school includes the issuance of credits for all work completed given the student passed an exam/quiz/ and/or completed a project (Vocational). Credits issued and recorded on a school transcript is the official record of a student's academic achievement at the secondary school.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#19	<p><i>Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?</i></p> <p>Unable to verify the existence of a master comprehensive computerized inventory. There is no inventory of the answer sheets. The TABE Coordinator needs to include an inventory of answer sheets to the computerized master inventory to account for all test materials including their location and current status.</p>	R. Moon, TABE Coordinator, was out ill during the Compliance Review. Inventories of test booklets are current and accurate. A system for inventorying answer sheets will be implemented.	Principal R. Moon, R. McClanahan	Provide hard copies of all TABE inventory data to Compliance Review Team. The Testing Coordinator will begin numbering all unopened answer Scantron packages, count 25 or 50 in each pkg., count loose answer sheets to get exact number in inventory, and subtract the number used after each exam to keep inventory accurate after each exam.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#21	<p><i>Is the Test of Adult Basic Education locator test being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?</i></p> <p>The TABE Coordinator indicated they have found that the inmates were memorizing the locator test resulting in inmates being tested in an inappropriate test level. They are now using an interview and an explanation of test levels before the inmates are tested and have seen a reduction of testing in the wrong level.</p>	TABE locator will be used for initial test on A-yard.	TABE Coordinator/Vice-Principal	TABE locator test to be used.	Complete. Locator now used for initial TABE tests.	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#22	<p><i>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?</i></p> <p>All teachers are not testing within 10 days of the student's initial entry into the class room, as well as quarterly testing based on the TABE Matrix. The Pre-Release and CALM classes are not TABE testing. In the other classes the initial TABE testing is done by the TABE Coordinators. Follow up post testing is done by teachers.</p>	<p>Inmates newly assigned to education programs are tested within 10 days of entry, with occasional exceptions. This process of having the TABE coordinator do all the initial testing has been verbally approved by R. McClanahan, OCE TABE coordinator. Also, due to the short class duration, CALM and Pre-Release classes are post-tested based on existing pre-tests. VSPW TABE SPARC report indicates that VSPW is in the top 5% for TABE results. Note: Initial testing should be approved at supervisory level, i.e., Associate Superintendent.</p>	<p>Principal, TABE Coordinator, Vice-Principal, CALM, Pre-Release Teachers, OCE.</p>	<p>Pre-Release and CALM classes to post-test for TABE. Other TABE testing procedures to remain as is.</p>	<p>Complete</p>	<p>IN COMPLIANCE</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#23	<p><i>Are the Test of Adult Basic Education tests administered according to the testing matrix?</i></p> <p>The TABE tests are not being administered by all teachers according to the testing matrix. The Pre-Release and CALM classes are not TABE testing. In the other classes the initial TABE testing is done by the TABE Coordinator. Follow up post testing is done by teachers.</p>	Those assigned to CALM or Pre-Release classes from academic programs are post-tested according to the OCE-approved matrix. Per R. McClanahan, OCE TABE Coordinator, CALM and Pre-Release courses are too brief, and do not meet the OCE-approved post-testing matrix, as it requires a minimum of 120 days between pre and post-test.	Principal, TABE Coordinator, Vice-Principal, CALM, Pre-Release Teachers, OCE.	Pre-Release and CALM classes to post-test for TABE. Other TABE testing procedures to remain as is	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#25	<p><i>Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?</i></p> <p>The Pre-Release and CALM classes are not using the TABE pre-post subtest diagnostic report for student needs assessment nor are they reviewing test scores with inmates.</p>	See #22				IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#26	<p>Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?</p> <p>The Pre-Release and CALM classes are not using the TABE pre-post subtest diagnostic report as a diagnostic tool for individualized instruction and trouble shooting TABE score loses in their classes.</p>	See #22				IN COMPLIANCE
#27	<p>Are current Test of Adult Basic Education subtests placed in student's file?</p> <p>In at least one case the current TABE subtests is placed in a separate locked file instead of the student file.</p>	Vice-Principal to verify that TABE subtests are kept in student files.	Vice-Principal/teacher(s)	Vice-Principal to train affected teacher(s) and verify by performing informal audits.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW

Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero

January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#28	<p><i>Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?</i></p> <p>There are no open line schedules for the distance education AEDM that are primarily serving college participants.</p>	Students submit interview requests to college coordinators and are ducatted immediately thereafter. The physical design of the institution does not lend itself to open line accommodation in that inmates do not have open access to the education area. In order to access the education area, they must be processed through a work change gate.	Vice-Principal/Indepe ndent Study/college teachers	Independent Study/college coordinators to develop and activate open line system schedule on each of the general population facilities.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#29	<p><i>Are the Television Specialist and Distance Learning Study Teachers developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?</i></p> <p>There is no Television Specialist and the Distance Learning teacher running primarily college programs are not using the education channel to deliver courses.</p>	<p>Under current circumstances, it would be a logistically difficult to attempt to broadcast college coursework over the single available institutional channel. Currently, college students are ducatted to the Independent Studies/college area where there are 8 television sets arranged to play the appropriate lectures associated with the many college courses offered. Television Specialist is scheduled to start on July 1, 2008.</p>	<p>Television Specialist, Vice-Principal, local administration.</p>	<p>Principal to work with TV Specialist and local administration to develop a plan to increase TV channel availability. There are currently 20 personal DVD players on order to be used in the college program.</p>	<p>Projected Completion Date: September 30, 2008.</p>	<p>IN COMPLIANCE</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#30	<p><i>Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?</i></p> <p>There is no Television Specialist and the Distance Learning teachers running primarily college programs are not using the education channel to deliver courses.</p>	See #29				IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#33	<p><i>Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?</i></p> <p>There are no Education/Work Program (half-time) classes.</p>	Clarify that VSPW was never required to implement this plan, only to explore this option. Also, VSPW has successfully implemented the other three AEDM models, which are viable in this environment.	Principal, Associate Superintendent.	Modify AEDM Operational Procedure (OP) to reflect the actual models which are workable at VSPW. It should be noted that the current AEDM OP does address this issue stating why VSPW did not opt to use the Education/Work model. A new AEDM OP will be crafted eliminating reference to the Education/Work model.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#34	<p><i>Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?</i></p> <p>The Distance Learning Classes do not have current course outlines and lesson plans that agree with the OCE approved curriculum Distance Learning because the teacher's are primarily coordinating college program.</p>	<p>There is one Distance Learning Teacher, who is primarily coordinating the TLN program. That DL Teacher does have course outlines and lesson plans that are aligned with the OCE-approved curricula. The teachers coordinating the college program are not Distance Learning teachers but are Independent Studies teachers. These teachers will ensure that at least 50% of students are pursuing HS/GED studies. Note: The DL Teacher may assume college students from Independent Studies, so that the latter may proved services to HS/GED students.</p>	Vice-Principal, Principal	<p>Principal to ensure that at least 50% of college enrollments are also actively seeking HS Diploma or GED. Work with OCE to establish college coordinator positions. Also, EMR created by OCE incorporates college enrollments and completions, therefore creating the impression that college enrollments are expected. Per M. Free, Associate Chief, OCE, Principal may assign teachers to other duties with approval of Associate Superintendent.</p>	<p>Independent Study college teachers to have min. 50% HS Diploma/GED enrollment by September 30, 2008.</p> <p>Positions to be assigned as post-secondary coordinators dependent upon headquarters.</p>	<p>NOT IN COMPLIANCE</p> <p>All AEDM teachers other than the Independent Study teachers have current OCE course outlines and lesson plans. However, the Independent Study teachers are still providing college services to which OCE does not support with lesson plans and course outlines. The participating colleges provide the college students with their own materials.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#36	<ul style="list-style-type: none"> Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? <p>Teachers are not testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program AEDM. AEDM teachers are not TABE testing students.</p>	<p>In the Reception Center, BEP students are CASAS and TABE tested. Copies of score reports may be found in the student files. AEDM programs are also CASAS tested. However, it should be noted that AEDM students are not assigned but are voluntary enrollees. The TABE testing protocols are mandated only for assigned education students</p>	Principal/Vice-Principals	Assigned inmates are being tested within the required 10 day time period.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

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#37	<ul style="list-style-type: none"> Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? <p>No evidence was found that AEDM rosters are given to the Vice-Principal and Principal on at least a weekly basis.</p>	Rosters are and were available in the Principal's office.	Principal/Vice-Principal	Principal will provide copies of (current) rosters.	Complete	IN COMPLIANCE
#38	<p><i>Are students' gains being recorded and tracked?</i></p> <p>The AEDMs do not have a formal measurement instrument/tool or system in place for all students.</p>	DL uses pre-GED College uses college assessments Independent Studies uses TABE, Pre-GED and CASAS assessments	Principal/Vice-Principal	Principal will ensure that these measures are continuing to be used on an ongoing basis	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW

Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero

January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#46	<p><i>Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with the confidential document procedure?</i></p> <p>The Correctional Offender Management Profiling for Alternative Sanctions teacher indicated it usually takes more than one day to complete the questionnaire. The incomplete questionnaires are locked in the assessment Office Technician's desk till they are completed and the data is entered into the computer. A shredder is located in their work area.</p>	<p>The questionnaires which are complete and whose data has been entered are shredded daily.</p> <p>Note: The COMPAS file review, inmate interview, computer input and shredding has been work-time studied; on average, it takes 4 hours per case to complete the process.</p>	Vice-Principal, COMPAS teachers, COMPAS OT	None	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#54	<p><i>Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?</i></p> <p>The CDCR Pre-Release curriculum recording system is not in use. However, there are two in house tracking systems used.</p>	The Pre-Release teachers will begin using the OCE-approved tracking system.	Vice-Principal, Pre-Release teachers	Vice-Principal to instruct/train Pre-Release teachers on appropriate tracking instrument and ensure recording systems in place and in use as part of routine classroom observations.	Complete	IN COMPLIANCE
#57	<p><i>Are all of California Department of Corrections and Rehabilitation Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?</i></p> <p>The CDCR Form 128Es (that are used to record all education participation including course completions) is not used. 128Bs are used instead of 128Es.</p>	128E chronological documents are used in all ABE, High School and GED classrooms. However, they have not been used in Pre-Release or CALM classes.	Vice-Principal, affected teachers.	Vice-Principal to train affected teachers and ensure implementation on the correct form.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

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#64	<p><i>Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.?</i></p> <p>Alternate modalities are not available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc because they have not been developed.</p>	Distance Learning does use worksheets and tutors, as well as the television to deliver instruction using alternative modalities. In addition, the teacher is on a rotation schedule which makes him available for individual or group instruction in the housing units.	Vice-Principal, Distance Learning teachers.	None	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#65	<p><i>Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?</i></p> <p>There is no TV Specialist. One candidate has been offered the job and is due the start July 1, 2008. There is no individual teacher access with the current TLN.</p>	<p>TV Specialist scheduled to start July 1, 2008.</p> <p>Distance Learning teacher is accessible to students on a rotating basis. Schedule is posted in housing units. TLN is available to students via the institutional TV channel. Enrolled students view program in housing unit game rooms according to published schedule.</p>	Vice-Principal, Distance Learning Teacher	As soon as the TV Specialist arrives, the TLN schedule will be posted on CCTC so that each teacher can take advantage of this benefit for their students.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

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#66	<p><i>Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?</i></p> <p>There is no TV Specialist. One candidate has been offered the job and is due the start July 1, 2008. There is no individual teacher access with the current TLN.</p>	See #65 Teachers are able to check-out TLN tapes.	Vice-Principal, Distance Learning Teacher	None	Complete	IN COMPLIANCE
#67	<p><i>Are school faculty members given the opportunity to provide input into the broadcast schedule?</i></p> <p>A system to give school faculty members the opportunity to provided input into the broadcast schedule has not been put in place.</p>	School faculty input for broadcast schedule will be incorporated into school processes.	Vice-Principal, Distance Learning Teacher, other faculty members.	System for ongoing faculty input into broadcast schedule to be developed and incorporated in continuous process.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN
Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
 Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
 January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
VOCATIONAL EDUCATION SECTION						
#3	<p><i>Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</i></p> <p>One of the program teachers is not completing 128E chronological quarterly reports. Some of the 128E chronological reports are inaccurate in reporting of the units completed each quarter.</p>	It is recommended that Education Supervisors audit files, provide documented training in completing 128Es, and monitor the progress on a quarterly basis.	L. Durkee, VVP	A complete audit of the Vocational files will be instituted. Documented training on properly completing 128Es will be provided to all Vocational faculty. Education Supervisors (Vice-Principals) will monitor the progress.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#6	<p>Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?</p> <p>Teachers were unaware that elective credits could be issued.</p>	No action required. OCE policy does not require Vocational programs to issue elective high school credits	L. Durkee, VVP	None	Complete	<p>NOT IN COMPLIANCE</p> <p>There is ongoing discussion regarding the issuance of credits for education work completed by students both at the local level and at the Office of Correctional Education.</p> <p>The fact that teachers are credentialed and VSPW is accredited allows VSPW to issue required credits as well as elective credits.</p> <p>VSPW is commended for issuing required credits for those inmates that participate in the high school program.</p> <p>The normal function of any school includes the issuance of credits for all work completed given the student passed an exam/quiz/ and/or completed a project (Vocational). Credits issued and recorded on a school transcript is the official record of a student's academic achievement at the secondary school.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#9	<p><i>Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?</i></p> <p>Most of the program teachers do not have course outlines of their programs.</p>	Vocational faculty need to develop new course outlines, per new OCE guidelines.	L. Durkee, VVP	A. Provide training on new OCE guidelines for course outlines. B. Draft course outlines.	Complete	IN COMPLIANCE
#30	<p><i>Is the Test of Adult Basic Education locator being used, when needed, to determine which level appropriate Test of Adult Basic Education test to administer?</i></p> <p>The Teachers do not administer the initial test. The TABE Coordinator identifies the appropriate post test level. The teachers administer the TABE post tests to their respective classes.</p>	No action required. Per R. McClanahan, OCE TABE coordinator, current practice is acceptable.	L. Durkee, VVP	TABE testing protocol at VSPW is being followed.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

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#34	<p>Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?</p> <p>All of the teachers have not received Gender Responsive Strategies training and do not have course outlines reflecting the Gender Responsive Strategies curriculum.</p>	No action required.	L. Durkee, VVP	All Vocational Instructors have received GRS training. There is currently not an OCE approved GRS curriculum for Vocational programs. Vocational teachers will incorporate GR Strategies into their lesson plans.	Partially completed. A comprehensive Gender Responsive curriculum will be used when made available by OCE.	IN COMPLIANCE
#35	<p>Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?</p> <p>Gender Responsive Strategies have not been incorporated into the program lesson plans.</p>	No action required.	L. Durkee, VVP	There is currently not an OCE approved GRS curriculum for Vocational programs. Vocational teachers will incorporate GR Strategies into their lesson plans.	Partially Complete. See above.	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#40	<p><i>Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly?</i></p> <p>Some of the vocational programs do not have a Trade Advisory Committee or attend or conduct any Trade Advisory Committee meetings.</p>	It is recommended that Education Supervisors audit the Vocational programs, provide documented training on Trade Advisory Committee meetings, and monitor the progress on a quarterly basis.	L. Durkee, VVP	A complete audit of the Vocational programs will be instituted. Documented training on Trade Advisory Committee meetings will be provided to all Vocational faculty. Supervisors will monitor the progress on a quarterly basis.	Complete/ongoing process.	IN COMPLIANCE
#41	<p><i>Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?</i></p> <p>Some programs did not have a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey to share with their students.</p>	A current Employment Development Department Job Market Analysis is provided to each Vocational program approximately every 6 months. Some of the programs may have misfiled the document. Education Supervisors will continue to provide EDD information every 6 months. A copy will be displayed in each program for student perusal.	L. Durkee, VVP	Education Supervisors will continue to provide EDD information every 6 months. Documented training will be provided on where to file and display the EDD information.	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN
Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
 Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
 January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
LAW LIBRARY/LIBRARY SECTION						
#11	<ul style="list-style-type: none"> • <i>Are law library discs checked in by the Associate Information Specialist Analyst?</i> • <i>If not, who checks them?</i> <p>The Warehouse notifies the Senior Librarian who picks up the discs and then loads them on the computers.</p>	No action required.	D. Johnson, Sr. Librarian	This is the most efficient method. Associate Information Specialists have trained library staff on how to load discs	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#13	<ul style="list-style-type: none"> Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years.) Does the library program have at least three directories relevant to the questions asked by the population served? <p>The encyclopedia is dated 2001, a new one was recently ordered. The unabridged dictionary is a 1993 edition. The Senior Librarian will purchase a new one with reduced recidivism funds. The library has a 2008 Directory of Attorneys, 2006 Headquarters USA, 2006-2007 Washington Info Information directory.</p>	Updated Unabridged Dictionary to be ordered. All other materials will be ordered as appropriate.	D. Johnson, Sr. Librarian	Orders to be submitted after budget for 08-09 fiscal year is distributed.	Subject to receipt of budgetary authority for fiscal year 08/09.	<p>NOT IN COMPLIANCE</p> <p>The unabridged dictionary was updated to a 2001 copyright date. However, it is still over the 5 year most recent date requirement.</p> <p>We will heck with the OCE Principal Librarian or additional clarification. Internet unabridged dictionary sites indicate that there are more current copies available.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#14	<p><i>Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?</i></p> <p>The Main library has a 2007 World Almanac; the atlases are more than three years old. The libraries maintain dictionaries within age limits.</p>	Updated World Atlas to be ordered	D. Johnson, Sr. Librarian	Orders to be submitted after budget for 08-09 fiscal year is distributed.	Subject to budgetary authority. Institution is responsible for purchase of Law Library materials.	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#16	<p><i>Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?</i></p> <p>The Facility A library collection is lacking adequate titles.</p>	Review and update collection	D. Johnson, Sr. Librarian	Inventory books on shelf Count books checked out Determine ratio of materials to inmates Keep monthly statistics of books added to collection and discarded to ensure ratio is appropriate. Order books as budget is available.	Projected Completion Date: August 31, 2008	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#20	<p>• Is <i>there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter?</i> <i>Can inmates request books that are not in the library collection?</i></p> <p>The library uses the Follett automated circulation system. Staff performs circulation duties. Inmates are not allowed to use the circulation computer – institution policy. There is no Interlibrary Loan process in place.</p>	Staff will look up for all inmates any title, subject or author to verify if it is in the collection. Due to Safety and Security reasons there is no Interlibrary Loan System for the Recreation Library. Inmates can make a suggestion for purchase of books they would like to see in the library. All suggestions will be considered for purchase when the next order is placed.	D. Johnson, Sr. Librarian	None	Complete.	IN COMPLIANCE
#21	<p>Is <i>there an adequate library book checkout system in place and an adequate overdue system in use?</i></p> <p>The Advantage Plus update to the circulation system can now only be accessed through the Internet. There is an adequate overdue system.</p>	Circulation system is still updated by discs. Cataloging system can only be updated on the internet.	D. Johnson Sr. Librarian	None	Complete	IN COMPLIANCE

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#22	<ul style="list-style-type: none"> • <i>Are the Gilmore v. Lynch mandated law books up to date?</i> • <i>Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish?</i> • <i>Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual?</i> • <i>Are all the Law Library Electronic Data System computers up-to-date and operating in each library?</i> <p>The library has begun to receive printed updates but has a break in some editions. Has not received Law Week yet. Bulletin boards are mounted in each library to display revisions, etc.</p>	<p>Report breaks in the editions</p> <p>Check on receipt of the U. S. Law week.</p>	D. Johnson Sr. Librarian	Send another report of missing editions to OCE. All received U.S. Law week editions have been placed on shelves.	Undetermined. OCE supplies updates. VSPW will continue to alert OCE of missing editions.	<p>NOT IN COMPLIANCE</p> <p>The Legal Library Electronic Data System/-Gilmore LLDS discs are not up to date due to centralized purchase delays faced by DEVOP/OCE. Materials are expected to arrive soon.</p>

VALLEY STATE PRISON FOR WOMEN

Compliance Review Audit for May 19-23, 2008

CORRECTIVE ACTION PLAN REVIEW
Reviewed by Beverly Penland, G. Lynn Hada, Raul Romero
January 13-14, 2009

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#24	<p><i>Is a procedure for accessing the Circulating Law Library in</i></p> <p>The library has an agreement with the Madera County Law Library to obtain needed books to photocopy the requested cases.</p>	Current method is best.	D. Johnson Sr. Librarian	None	Complete	<p>NOT APPLICABLE</p> <p>The California Department of Corrections and Rehabilitation/Division of Education, Vocations and Offender Programs/Office of Correctional Education opted out from previous agreements. A review to readdress this issue is taking place at the Office of Correctional Education.</p>
#28	<ul style="list-style-type: none"> <i>Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee?</i> <i>Do inmate clerks receive training on a regular basis in law library and general library processes?</i> <p>The current law library clerks received training from a previous law clerk that was a trained paralegal. Staff provides initial training in general library processes. Print materials are available on the procedures for book repair.</p>	Senior Librarian trains all Law clerks. The Law clerk that is a certified paralegal currently works as a Law clerk in the Law Library and assists in training the law clerks on a day-to-day basis.	D. Johnson Sr. Librarian	None	Complete.	<p>NOT IN COMPLIANCE</p> <p>Law Library Inmate Clerk training is not documented.</p>

CORRECTIVE ACTION PLAN

ACTION SOURCE: Education Compliance Review Results

May 19-23, 2008

Valley State Adult School at Valley State Prison for Women

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
FEDERAL GRANTS-Work Investment Act (WIA)						
#16	<p><i>Is there a current Student Job Description on file?</i></p> <p>The Federal Education Grievance Procedure policy is not included in Student Job Description. Memo dated June 23, 2006.</p>	Place a copy of the Federal Education Grievance in all Student Job Descriptions.	Z. Patrick, P D. Haworth, AVP		Complete	<p style="text-align: center;">IN COMPLIANCE</p> <p>The Federal Education Grievance Procedure policy is now included in Student Job Descriptions</p>
#29	<p><i>Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? (Conduct an inventory)</i></p> <p>This LLL has new computers. PLATO has not been out to open the upgrades. Mr. Culver has tried to make arrangements, but PLATO has not responded.</p>	Upgrade PLATO software and tag PLATO equipment.	Z. Patrick, P D. Haworth, AVP	Contact and ensure PLAT Technician comes to VSPW to Service PLATO. Attach WIA tags to all new computers.	Complete	<p style="text-align: center;">IN COMPLIANCE</p> <p>The PLATO Technician was able to come to VSPW to address all existing PLATO needs. The VSPW Education Department is maintaining a complete and current inventory of the new computers. The PLATO equipment is tagged with a Workforce Investment Act property tags.</p>

CORRECTIVE ACTION PLAN

ACTION SOURCE: Education Compliance Review Results

May 19-23, 2008

Valley State Adult School at Valley State Prison for Women

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
#30	<p><i>Is your software appropriately maintained by PLATO's technical field staff?</i></p> <p>The Reading Plus software is not installed. CCWF received the software program in August, 2007.</p>	PLATO Technician/AISA needs to install the Reading Plus software.	Z. Patrick, P D. Haworth, AVP	PLATO Technician and AISA will be contacted to install the Reading Plus software.	Complete	<p style="text-align: center;">IN COMPLIANCE</p> <p>The Reading Plus software is now installed.</p>
#36	<p><i>Are you using the latest version of the TOPSpro Management Information System software?</i></p> <p>TOPSpro version 4.55. Two upgrades have been sent out since this version.</p>	The PLATO Technician/AISA needs to install the TOPSpro upgrade software.	Z. Patrick, P D. Haworth, AVP	Contact the PLATO technician/AISA to install the TOPSpro upgrade software.	Complete	<p style="text-align: center;">IN COMPLIANCE</p> <p>TOPSpro has been upgraded to the latest version.</p>

CORRECTIVE ACTION PLAN

ACTION SOURCE: Education Compliance Review Results

May 19-23, 2008

Valley State Adult School at Valley State Prison for Women

Item	Deficiency	Corrective Action Required	By Whom	Proposed Action Plan	Completion Date	ECB Review Findings 1-14-09
FEDERAL GRANTS-Vocational and Technical Education Act Grant (VTEA)						
#10	<p><i>Are quarterly meetings held and minutes kept? (Note the Number of Trade Advisory Committee members, number in the comments section).</i></p> <p>The Air Conditioning and Refrigeration TAC member refused to come into the prison and instructor was told that TAC members had to come in since the Instructor is not allowed top go out to the community.</p>	The Air Conditioning and Refrigeration TAC membership issue needs to be resolved.	Z. Patrick, P L. Durkee, VVP	Assist the Air Conditioning and Refrigeration Teacher set up the appropriate TAC membership participation meetings.	Complete	<p>IN COMPLIANCE</p> <p>The Air Conditioning and Refrigeration TAC meetings are taking place.</p>

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

INMATE
APPEALS

VALLEY STATE PRISON FOR WOMEN
JANUARY 5 THROUGH JANUARY 16, 2009

The seal of the California Department of Corrections and Rehabilitation is circular, featuring a green border with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom. Inside the seal is a map of California with a scale of justice and two stars.

PRELIMINARY

CONDUCTED BY

INMATE APPEALS BRANCH

**INMATE APPEALS AUDIT
AMENDED EXECUTIVE SUMMARY**

Valley State Prison for Women
January 12 - 16, 2009

This Executive Summary provides the area and a brief description of the findings of the Inmate Appeals Audit. Complete details will be provided in the Final Report. The findings have been discussed with the Appeals Office staff.

The findings in this Inmate Appeals Audit resulted in an overall score of ***90**. All areas and their results are listed below.

OVERALL RATING	*90%
A. ACCESS TO INMATE APPEALS	70%
B. TRACKING/FILING APPEALS	98%
C. PREPARATION OF APPEALS	70%
D. TIMEFRAMES	80%
E. APPEAL RESPONSES	98%
F. SPECIALIZED PROCESSING OF APPEALS	100%
G. TRAINING and OFFICE STAFFING	100%
H. CURRENT OVERDUE APPEALS	100%

Corrective Action areas are: (change the below data accordingly)

- **A. Access to Inmate Appeals**

3. Does the institution provide the orientation inmates with a written summary of the inmate's right to appeal, and information regarding the Appeal Procedure? CCR 3002(a)(2)

The Orientation Handbook is provided for the inmates in the reception building at the time of arrival; however, it does not mention the appeals process. The institution is in the process of correcting this by adding the appeals portion to the Orientation Handbook.

4. Does the institution provide the Orientation inmates verbal staff instructions regarding the inmate's right to appeal and information regarding the Appeal Procedures? CCR 3002(a)(2)

Half points have been given to this question, because there is not an established Orientation Presentation for Reception inmates regarding the appeals procedures are verbally presented. However, staff are available to answer questions that inmates may have regarding the appeal process.

- **C. Preparation of Appeals**

2. Did the dates on the appeal correspond with the dates on the IATS? DOM Section 54100.9

The low score in this section is due mostly to the completion dates varying between the date on the 602 and the IATS. There were also many instances where the date completed on the 602 by the receiver, and the date completed IATS did not agree.

3. A review of the appeals indicates they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602? DOM Section 54100.3

The low score in this section is the result of dates missing on the 602s. Most appeals were missing the "Completed Dates" on the First and Second Level Review. A few of the appeals that were reviewed did not include the "Received" and "Completed" dates at the Informal level. This issue was discussed with the Appeal's Office, and appears to be a training issue for custody staff.

- **D. Timeframes**

1. Are appeals being assigned at each level within five working days of receipt in the Appeals Office?

The lower score in this section is due to some appeals not being assigned within the five day requirements. Specifically, the Staff Complaints reviewed are not being assigned until the hiring authority completes the AB 05/03 administrative process, which delays the five day time constraints. It also appears that all other categories of appeals are sometimes processed in large numbers on certain days, but are still not being assigned within the five working days allowed.

2. Are informal appeals completed within ten working days?
CCR 3084.6(b)(1).

The low score in this section is due to staff not completing the informal appeals in a timely fashion.

****AMENDED FINAL REPORT***
INMATE APPEALS AUDIT

Valley State Prison for Women
January 12-16, 2009

Review Team: S. Wright, Facility Captain, Inmate Appeals Branch
S. T. Smith, Correctional Counselor II, Avenal State Prison

SUMMARY CHART

AREA REVIEWED		COMPLIANCE RATING 2002
	Percentage	Page No.
OVERALL RATING	90%	1
A. ACCESS TO INMATE APPEALS	70%	3
B. TRACKING/FILING APPEALS	98%	4
C. PREPARATION OF APPEALS	70%	5
D. *TIMEFRAMES	*80%	6
E. APPEAL RESPONSES	98%	7
F. SPECIALIZED PROCESSING OF APPEALS	100%	8
G. TRAINING and OFFICE STAFFING	100%	9
H. OVERDUE APPEALS	100%	10

Valley State Prison for Women

January 12-16, 2009

INMATE APPEALS AUDIT

The findings in this Inmate Appeals Compliance Review resulted in an overall score of 90%. Three areas received 100%; Specialized Processing of Appeals, Training and Office Staffing, and Overdue Appeals. Those areas plus the areas receiving less than 100% are listed below with applicable notations.

It should be noted the appeals office staff interviewed were knowledgeable and familiar with the established departmental and institutional policies and procedures relative to the appeals process. CC-II, Sid Cates, AGPA, Mark Wilson, and OT, Angela Arnold in the Appeals Office are experienced and knowledgeable in all facets of the appeals process. The staff were able to locate documents needed for the review and provide information in a timely manner. It was indeed a pleasure to work with the Appeals Office staff.

The specific sections and their corresponding questions and scores are identified below.

Copies of the Inmate Appeals Worksheets are available upon request.

A. ACCESS TO INMATE APPEALS:	Section Rating:	100
------------------------------	-----------------	-----

- 1) **Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate?** [CCR 3084.1 (c)]

2 sample # 2 # correct = 100%

Question Rating: 50

Score: 50

**Every housing unit and library had a good supply of both CDC Forms 602s and 1824s. Staff were very helpful in providing these forms to the Review Team.*

- 2) **Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and any facility appeal supplement in each inmate law library?** [DOM Section 53060.11,54100.3]

1 sample # 1 # correct = 100%

Question Rating: 10

Score: 10

- 3) **Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures?** [CCR 3002(a)(2)]

No

Question Rating: 20

Score: 0

The orientation handbook is provided for the inmates in the reception building at the time of arrival; however, it does not mention the appeals process. The institution is in the process of correcting this by adding the appeals portion to the orientation handbook.

INMATE APPEALS AUDIT
FINAL REPORT

VSPW

January 12-16, 2009

Page 3 of 11

- 4) Does the institution provide the orientation inmates verbal staff instruction regarding the inmates right to appeal and appeal procedures? [CCR 3002(a)(2)]**

Yes

Question Rating: 20 **Score: 10**

**Half points have been given to this question because there is not an established Orientation presentation in which the appeals procedures are verbally presented. However, staff are available to answer any questions that inmates may have regarding the appeals process.*

- 5) ** Does the institution provide the CDC form 602 in both English and Spanish?**

The reviewers found no Spanish CDC form 602's in the institution; however, the institutional staff corrected the problem immediately. There is only a temporary supply of Spanish CDC form 602's in the institution and this problem needs to be rectified.

SECTION POINT TOTAL

70

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 4 of 11

B. TRACKING AND FILING APPEALS

Section Rating:

- 1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]**

Yes

Question Rating: 15 **Score: 15**

- 2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]**

85 sample # 85 # correct = 100% Question Rating: 25 **Score: 25**

- 3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]**

12 sample # 11 # correct = 92% Question Rating: 25 **Score: 23**

- 4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?**

[CCR 3084.6, DOM 54100.12]

Yes

Question Rating: 35 **Score: 35**

**It is noted the Administrative Staff are noticed weekly of the overdue appeals and the Administrative Staff are diligent in their efforts to bring the overdue list to zero.*

SECTION POINT TOTAL 98

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 5 of 11

C. PREPARATION OF APPEALS

Section Rating

- 1) Are inmates interviewed at the first level of review or at second level if first level is waived? [CCR 3084.5 (f) and DOM 54100.14]**

85 sample # 82 # correct = 96%

Question Rating: 25 **Score: 24**

- 2) Do the dates on the appeal correspond with the dates on the IATS?**
[DOM Section 54100.9]

85 sample # 23 # correct = 4%

Question Rating: 25 **Score: 1**

The low score in this section is due mostly to the completion dates varying between the date on the 602 and the IATS. There were many instances where the date completed on the 602 by the reviewer and the date completed on the IATS did not agree.

- 3) A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)? [DOM Section 54100.3]**

85 sample # 70 # correct = 82%

Question Rating: 25 **Score: 20**

The low score in this section is the result of dates missing on the 602s. Most appeals were missing the "Completed Date" on the First and Second Level of Review. A few of the appeals that were reviewed did not include the "Received" and "Completed" dates at the Informal level. This issue was discussed with the Appeals Office and it appears to be training issue for custody staff.

- 4) Is there evidence that appeal decisions are reviewed by the institution head or his/her designee? ?[CCR 3084.5(e)(1)]**

18 sample # 18 # correct = 100%

Question Rating: 25 **Score: 25**

SECTION POINT TOTAL 70

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 6 of 11

D. TIMEFRAMES

Section Rating:

- 1) Are appeals being assigned at each level within five working days of receipt in the Appeals Office? [DOM 54100.9]**

85 sample # 58 # correct = 68 %

Question Rating: 25 **Score: 17**

**The low score in this section is due to some appeals not being assigned within the five day requirements. Specifically, the Staff Complaints reviewed were not assigned until the Hiring Authority completed the AB 05/03 administrative process, which delayed the five day assigning time frames. It appears that all other categories of appeals are sometimes being processed in large numbers on certain days, but are not being assigned within five working days.*

- 2) Are informal appeals completed within ten working days?
[CCR 3084.6 (b)(1)]**

7 sample # 5 # correct = 70 %

Question Rating: 25 **Score: 17**

The low score in this section is due to staff not completing the Informal appeals in a timely fashion.

- 3) Are first-level responses completed within 30 working days?
[CCR 3084.6 (b)(2)]**

70 sample # 68 # correct = 97 %

Question Rating: 25 **Score: 24**

- 4) Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)? [CCR 3084.6 (b)(3)]**

18 sample # *16 # correct = *89 %

Question Rating: 25 **Score: *22**

****The low scores regarding timeframes were a result of the overdue appeals. This section has been amended to reflect the changes in samples correct from 12 to 16.***

SECTION POINT TOTAL ***80**

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 7 of 11

E. APPEAL RESPONSES

Section Rating:

- 1) Does the institution prepare a written response at the first level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

70 sample # 69 # correct = 98 %

Question Rating: 25 **Score: 24**

- 2) Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered? [CCR 3084.5 (g) and DOM 54100.15]**

70 sample # 68 # correct = 97 %

Question Rating: 25 **Score: 24**

- 3) Does the institution prepare a written response at the second level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

18 sample # 18 # correct = 100 %

Question Rating: 25 **Score: 25**

- 4) Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?**

[CCR 3084.5 (g) and DOM 54100.15]

18 sample # 18 # correct = 100 %

Question Rating: 25 **Score: 25**

SECTION POINT TOTAL **98**

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 8 of 11

F. SPECIALIZED PROCESSING OF APPEALS

Section Rating:

STAFF COMPLAINTS
CDC FORM 1824s
APPEAL RESTRICTION

STAFF COMPLAINTS

- 1) **When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations.)**

Yes

Question Rating: 20 **Score: 20**

- 2) **Is the institution keeping Staff Complaints for a period of five years?**
[DOM 54100.25.5 and Penal Code 832.5(b)]

Yes

Question Rating: 20 **Score: 20**

- 3) **Are all allegations of staff misconduct presented to the warden or designee for determination of the type of inquiry needed?** [AB 05/03]

Yes

Question Rating: 20 **Score: 20**

- 4) **Are all allegations of staff misconduct presented to the warden or designee at least weekly?** [AB 05/03]

Yes

Question Rating: 20 **Score: 20**

APPEAL RESTRICTION

- 5) **Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction?** [CCR 3084.4(3), (4)]

Yes

Question Rating: 20 **Score: 20**

SECTION POINT TOTAL **100**

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 9 of 11

G. TRAINING/OFFICE STAFFING

Section Rating:

- 1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3]**

Yes

Question Rating: 20 **Score: 20**

- 2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2]**

Yes

Question Rating: 30 **Score: 30**

- 3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in Department policy? [DOM 32010.8.4, 54100.3]**

Yes

Question Rating: 30 **Score: 30**

- 4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(a) and 3041(e)(1)]**

Yes

Question Rating: 20 **Score: 20**

There is no inmate assigned in the Appeals Office except to clean.

SECTION POINT TOTAL **100**

INMATE APPEALS AUDIT
FINAL REPORT

VSPW
January 12-16, 2009
Page 10 of 11

H. OVERDUE APPEALS

Section Total:

- 1) What is the number of overdue First Level appeals and by how many days late?**
[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	
31-90 days	0	.50	
91-180	0	.75	
181+	0	1	

Question Rating: 50
Points deducted: 0
Score: 50

- 2) What is the number of overdue Second Level appeals and by how many days late?**
[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	
31-90 days	0	.50	
91-180	0	.75	
181+	0	1	

Question Rating: 50
Points deducted: 0
Score: 50

APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	
31-90 days	0	.50	
91-180	0	.75	
181+		1	

of Appeals: 0

Points Deducted: 0

Score: N/A

SECTION POINT TOTAL 100

INMATE APPEALS AUDIT
FINAL REPORT

VSPW

January 12-16, 2009

Page 11 of 11

ADDITIONAL AREAS OF REVIEW: This portion of the audit tool has been added in September 2006. These areas of the institution will be reviewed for information gathering; however, scores will not be obtained.

1. Law Library access for SHU and ASU inmates:

- a) What is the process for allowing SHU and ASU inmates access to the law library?
[CCR 3122, 3160, 3164, 3343]

Inmates put in a request and are educated.

- b) How often do these inmates have access to the law library?

Two days per week, Mondays and Wednesdays.

- c) How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates?

PLU inmates have library access four days a week and GLU receive access everyday.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
BED UTILIZATION REVIEW

VALLEY STATE PRISON FOR WOMEN

JANUARY 5 THROUGH JANUARY 16, 2009

The seal of the California Department of Corrections and Rehabilitation is partially visible behind the 'PRELIMINARY' text. It features a circular design with a green border containing the text 'DEPARTMENT OF CORRECTIONS AND REHABILITATION' at the top and 'STATE OF CALIFORNIA' at the bottom. The center of the seal depicts a golden scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

CLASSIFICATION SERVICES

VALLEY STATE PRISON FOR WOMEN

Week of January 12, 2009

ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The Valley State Prison for Women (VSPW) Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during the week of 1/12/09. Correctional Counselor (CC) - III M. Scott, assisted by Captain S. Plainer, Captain F. Sanders and CC-II D. Johnson, conducted the review.

The intent of this review is to provide an evaluation of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution to assist in identifying areas that could reduce time spent in ASU and overcrowding in ASU. A review of a tracking tool entitled AD-SEG/ SHU Roster (discussed later in this report) reflected approximately 77 inmates housed in ASU as of 1/12/09. Per Control/ DMS, there are 75 inmates in ASU as of 1/14/09. Approximately 45 cases were reviewed by the team and of that number, 40 were used in the report. Attached to this report is a breakdown of the cases that were reviewed.

The cases reviewed were broken down into the following categories:

34 were placed in Administrative Segregation based on a pending disciplinary charge.

6 were placed in Administrative Segregation based on safety concerns.

0 were placed in Administrative Segregation based on gang/ disruptive group issues.

Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU? Yes. Based on conversation with VSPW staff, there is a tracking tool entitled the AD-SEG / SHU Roster which is maintained jointly by all ASU CC-IIs. The Log was organized by facility. The AD-SEG / SHU Roster contains helpful information such as ASU placement date, disciplinary charge (or reason for ASU placement), ASU extension/ approval date, dates of last and next ICC, pending ICC actions/ CSR referrals and status of District Attorney (DA). The log appeared to be current and updated, matching the information noted in the central files.

Comment: Although there is not a requirement that a system other than the Distributed Data Processing System (DDPS) be maintained, the DDPS capabilities are limited. A comprehensive ASU tracking system can identify a multitude of data fields, which can be customized by the needs of each specific institution. The tracking

system can be very basic but still provide meaningful information that can significantly reduce workload. The system should be maintained in a format that can be sorted by specific areas to enable staff to easily identify possible problem areas at a quick glance.

GENERAL ASU CASE PROCESSING TIMES

Period from Initial Placement in ASU to CSR Review

California Code of Regulations (CCR) 3335(c)(1) requires that the Institution Classification Committee refer the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.

California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.

Time from the date of placement in Administrative Segregation to the initial ICC referral for CSR Review ranged from **1** day to **22** days. Of the cases reviewed, **95%** met this expectation. The "22" day case was that of Inmate CRUZ X-15968. The initial ICC review was delayed due to the inmate's suicide attempt resulting in transfer to CCWF for observation per documentation in the central file. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%).

It is the expectation that cases referred for ASU retention be presented to the Classification Staff Representative (CSR) for review within 30 days of the Classification committee referral (California Code of Regulations 3335(e)).

Time from the initial ICC referral for CSR Review to the actual CSR review ranged from **6** days to **90** days. Of the cases reviewed, **54%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). A significant number of the cases reviewed (21 of 39 cases) were well over the 30 day time frame. This deficiency was also noted during a prior audit occurring during the week of 4/30/07 at VSPW. There is a continuing need for improved tracking of these cases to ensure timely presentation to the CSR.

When an ASU case is reviewed by a CSR, the CSR will indicate a time period in which

the case must be presented again to a CSR for further review. The expectation is that all cases should be presented back to a CSR prior to the expiration of the ASU extension approved.

Of the 40 cases reviewed, there are 9 cases currently retained in ASU beyond the CSR approved retention. This calculates to **78%** compliance in this area. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion, you would divide 42/50 which would calculate to 84%).

There was one case noted that had been in ASU over 30 days without an ASU extension approval. This was the case of Inmate Cox X-25116. This inmate was placed into ASU on 11/6/08 due to Participation in a Riot. Initial ICC occurred on 11/12/08 however the case was never presented to the CSR. ICC of 1/14/09 acted to assess, impose and suspend a SHU term; and release the inmate to the GP. **(The expectation is there should be 0 cases in this category).**

DISCIPLINARY CASES

Hearing Timelines

Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney (DA) review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.

A total of 59 RVRs were reviewed.

RVRs heard without postponement:

29 RVRs were examined.

Time from the date of the issuance of the RVR to the date the RVR was heard ranged from 4 days to **36** days. The non-postponed RVRs reviewed were adjudicated, on average within 15 days from the date of the RVR.

RVRs heard with postponement pending DA action:

8 RVRs were noted. RVRs which were originally postponed but later rescinded were included

in this count.

Time from the date of the RVRs to the date the RVRs were heard ranged from 14 to **143** days, for an average of 84 days. ISU's method of receiving incident reports and processing DA referrals is discussed later in this report.

Post-Hearing Processing Timelines

Following the completion of the hearing by the disciplinary hearing officer or committee, there are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.

21 RVRs are still pending. In approximately 7 cases, the reviewers were unable to determine whether the pending RVRs had been postponed by the inmate pending DA referral outcome. Frequently, ICC did not address in the CDC 128G whether the inmate had postponed the hearing nor did DA Referral logs available from ISU clarify this information.

Hearing to Facility Captain Review:

Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 5 working days.

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from **0** (as in reviewed same day as hearing) days to **34** days.

Of the cases reviewed, **78%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, the Captain's review of the RVR occurred 5 days after the hearing.

Facility Captain to Chief Disciplinary Officer Review:

Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 3 working days.

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from “0” (as in same day as Captain’s review) days to **38** days.

Of the cases reviewed, **54%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, the CDO’s review occurred 4 days after the Captain’s review.

Chief Disciplinary Officer to ICC review:

Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate’s case within 14 days.

Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from “0” days (as in reviewed by ICC the same day of CDO signature) to **110** days.

Of the cases reviewed, **47%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). Time from the date the CDO audited the RVR to the case being reviewed by ICC 25 averaged days.

The “110” day case was that of Inmate Cruz, X-20727. Inmate Cruz received an RVR dated 9/3/08 for Threat to Staff. CSR of 10/9/08 noted this RVR had been adjudicated and requested case be referred for SHU audit, granting a 15 day ASU extension to complete this casework. The case was not reviewed until 1/14/09 at which time ICC referred the case for SHU audit and released the inmate from ASU. There was no information in the file to indicate the inmate had departed VSPW during this time period.

Also noted was the case of Inmate Smith W-97393 who received four RVRs while in ASU, which have all been adjudicated. There has been no ICC review since 8/6/08. The last RVR was adjudicated on 12/8/08.

Based on the low percentage of cases seen by ICC within 14 days of CDO audit, Staff should examine the method of how classification staff are notified of adjudicated RVRs. Per conversation with VSPW classification staff, staff is notified of an adjudicated RVR via various means. One CC-II indicated notification of an adjudicated RVR via the CDC 128B RVR disposition chrono and “white” copy of the RVR provided by the SHO. Other CC-II’s indicate they work closely with the Lieutenants to keep track of when an RVR has been adjudicated. Once notified of the adjudicated RVR, the case should be scheduled for the next available ICC (rather than the next 60 or 90 day routinely scheduled ICC) especially if transfer referral or release from ASU may be involved. VSPW should consider

implementation of a procedure where-in, upon adjudication, an ASU manager or other designated staff is provided with a copy of the adjudicated RVR (at least the first page of the RVR), which can then be distributed to appropriate RC and GP ASU classification staff to alert them to the presence of the adjudicated RVR, affording opportunity for the next available ICC and contributing to more timely release or transfer from ASU.

Parole Violator Cases referred to the Board of Prison Hearings (BPH) for review:

The number of parole violator (return to custody/ RTC) cases was insufficient to provide a fair review. Therefore, the time-frames related to BPH referrals, were not examined.

Incident Report Processing

Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.

Per interview with ISU, ISU staff become aware of an incident by collecting weekly a Daily Information Reporting System report (DIRS) from the Watch Commander. Two computer logs of the incident reports are maintained by ISU. The first log, entitled DA REFERRAL (PENDING) displays information such as "REFERRED" (date of referral), "STATUS", "FOLLOW DATE (assumed to mean follow-up date) & STATUS". The "STATUS" for all cases on this log reflected "PENDING", and the "FOLLOW DATE AND STATUS" was also left blank in all cases. Cases which were accepted for prosecution were maintained on a second log entitled DA REFERRAL (ACTIVE) LOG. This log included the date of the DA referral, "ACCEPT" (date) and the status of the case ("NEXT COURT ACTION").

Neither log indicated the date ISU received the incident report or the date the case was screened out by ISU or rejected by the DA. ISU staff explained to the auditor the date of the DA referral or screen-out was the same date the incident report was received by ISU.

VSPW ISU staff presented several documents used to advise of the DA status—a CDC 128B "Case Referred" which indicates ISU has determined the case meets criteria for referral and is being referred to the DA for criminal prosecution; a CDC 128B "Does Not Meet Criteria Not Referred to DA", a CDC 128B Court Disposition Minute Order, a "NOTICE DO NOT TRANSFER DA REFERRAL" cover sheet; a "NOTICE DO NOT TRANSFER DA ACCEPTED" cover sheet, a "NOTICE REMOVE HOLD DA REJECTED" cover sheet, and a "NOTICE REMOVE HOLD CASE COMPLETED" cover sheet. ISU reports documentation related to DA referral status is hand-carried to Records and to the Captains of the sending

facilities for placement in the file by Records Staff or distribution to the Senior Hearing Officer. Records office staff report ISU delivers documents for file approximately once per week. The DA referral related documents are handled as priority filing by Records.

During the audit, reviewers consistently noted a lack of documentation in the file to indicate whether the case had been referred to the DA and status of the DA referral (screened-out, accepted, rejected etc.). The only document typically found in the file related to DA status was the CDC 128B Case Referred or the CDC 128B Does Not Meet Criteria Not Referred to DA chronos; and even these were infrequently found in the file. The chronos did not indicate when ISU received the Incident Report. Also noted, the CDC 128G classification chronos routinely did not indicate whether the inmate had postponed the hearing pending DA referral/outcome. In the cases where Does Not Meet Criteria Not Referred to DA chronos were found in the file, there appeared to be a significant time lapse from the date of the RVR to the date of the chrono, resulting unnecessary delay in the hearing of the postponed RVR.

The lack of DA referral information in the files, combined with a lack of information in the DA Referral Logs, resulted in the inability of the auditors to conduct a full evaluation of the DA processing time-frames.

Incident Date to ISU Receipt of Incident Report:

Per the Deputy Director Memorandum dated March 26, 2003 the complete package will be presented to ISU within 21 calendar days.

Date from incident occurrence to the date ISU received the Incident Report ranged from “0” days to **113** days.

Of 22 DA referral cases for which this information could be determined, only **1%** was presented within 21 calendar days. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%).

The following could not be evaluated but is provided for informational purposes:

Regarding date ISU receives the CDC 837 to DA screen-out or referral: **Per the Deputy Director memorandum dated March 26, 2003 the expectation is the time should not exceed 5 working days.**

Regarding DA Referral to Resolution: **This is one area that the institution has no definitive control over, however, it is suggested that the institution work closely with the DA’s office to track the decision making process to resolution of either acceptance**

of the case for prosecution or rejection of the case for prosecution.

VSPW needs to improve the method by which DA referrals are tracked, especially related to screen-outs and DA rejects; to ensure postponed RVRs are heard as expeditiously as possible. The DA referral process was noted as discrepant during a prior audit occurring the week of 4/30/07. The following recommendations should be considered: ISU should obtain the DIRS on a daily instead of weekly basis. ISU should review an initial copy rather than a final copy of an Incident Report for basic screen-out purposes. The two DA Referral logs maintained by ISU should be combined and amended to include the date the incident report is received by ISU, the date of the screen-out or DA referral, and the date of the DA reject. ISU needs to ensure documents related to DA status are forwarded for placement in the central file and to the SHOs in a timely manner.

SAFETY CONCERNS

When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints that delay the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.

There were 6 cases reviewed that were placed in Administrative Segregation based on the need for investigation of safety concerns.

Investigation initiation to Completion:

Per the Deputy Director Memorandum dated March 26, 2003 the expectation is this time should not exceed 30 calendar days.

Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from “0” days (as in completed same day of referral) to **90** days.

Of the cases reviewed, **50%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). Investigations were completed **on average, within 34 days.**

Investigation Completion to ICC Review:

Per CCR 3335(d) (1) (2), upon resolution the ICC shall review the inmate's case within 14 days.

Time from conclusion of the investigation to ICC review of investigation results ranged from "1" day to **78** days.

Of the cases reviewed, **67%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, cases were seen by ICC within 26 days of the conclusion of the investigation.

GANG INVESTIGATION/VALIDATION/DEBRIEFING

There were 0 cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation/Debriefing and this area was not evaluated as ASU placement and SHU placement are generally not involved at the female institutions.

NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER

Documentation in the central files indicates that 3 of the cases reviewed in ASU are currently endorsed for transfer.

SUMMARY AND RECOMMENDATIONS

1. California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement. 95 percent of the cases met this expectation.
2. It is the expectation that cases referred for ASU retention be presented to the CSR for review within 30 days of the Classification committee referral (California Code of Regulations 3335(e)). Only 54 % of initial ASU ICC cases were presented to the CSR within the required 30 days. The flow of the CDC 128G should be monitored to ensure timely CSR presentation in accordance with CCR section 3335(e).
3. When an ASU case is reviewed by a CSR, the CSR will indicate a time period in which the case must be presented again to a CSR for further review. The expectation is that all cases should be presented back to a CSR prior to the expiration of the ASU extension approved. 78% of the cases met this expectation. The AD-SEG/ SHU Roster (ASU tracking log) should be updated and monitored closely to ensure cases

are presented no later than the ASU extension expiration date.

4. Related to the disciplinary process, Per the Deputy Director memorandum dated March 26, 2003, the expectation is the RVR will be reviewed by the Captain within 5 working days. 78 percent of the case met this expectation and on average were reviewed within 4 days of the hearing.
5. Related to the disciplinary process, Per the Deputy Director memorandum dated March 26, 2003, the expectation is the RVR will be reviewed by the CDO within 3 working days of the Captain's audit. 54 percent of the case met this expectation and on average were reviewed within 5 days of the hearing.
6. Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate's case within 14 days. 47% of the RVRs presented to ICC after CDO audit met this expectation. VSPW should consider implementation of a procedure where-in, upon adjudication, an ASU manager or other designated staff is provided with a copy of the adjudicated RVR (at least the first page of the RVR), which can then be distributed to appropriate RC and GP ASU classification staff to alert them to the presence of the adjudicated RVR, affording opportunity for the next available ICC and contributing to more timely release or transfer from ASU.
7. Related to Incident Report processing, there were major problems noted with the timeliness of the receipt of the incident package by ISU (only 1% received within the 21 day time-frame), lack of information in the central files related to DA status, omission of important information (date of screen-out, rejection) and lack of update related to the DA Referral Logs; all of which can contribute to a delay in the hearing of postponed RVRs and unnecessary time in ASU. The following is recommended:
 - ISU should obtain the DIRS on a daily instead of weekly basis.
 - The two DA Referral logs maintained by ISU should be combined and amended to include the date the incident report is received by ISU, the date of the screen-out or DA referral, and the date of the DA reject.
 - ISU should review an initial copy rather than a final copy of an Incident Report for basic screen-out purposes.
 - ISU needs to ensure documents related to DA status are forwarded for placement in the central file and to the SHOs in a timely manner.
8. Related to safety investigations, per the Deputy Director memorandum dated March 26, 2003 the expectation is investigation should not exceed 30 calendar days. 50% met this expectation with an average of 34 days.
9. Related to safety investigations, per the Deputy Director Memorandum dated March 26, 2003 the expectation is the case should be presented to ICC with 14 days of the conclusion of the investigation. 67% met this expectation with an average of 26 days.

Other:

- As a positive reflection on the disciplinary process, it was noted non-postponed RVRs are being heard in a timely manner.
- The AD-SEG/ SHU Roster was updated and appeared accurate, making this a very useful tracking tool when monitored.

VSPW staff were helpful and cooperative in supplying information, documents and central files related to this audit. Their assistance was greatly appreciated.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPT Desk To BPH for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
X22597	7	36	5/4/09	0	10/29/08	Weapon	unk	not heard	NA	NA	NA	NA	NA	NA	22	0	-39772	pending	75	Not heard
X24621	8	41	3/2/09	0	7/8/08	Battery on Staff	yes	not heard	NA	NA	NA	NA	NA	NA	34	0	87	accept	187	RVR of 7/8/08 Not heard. Received additional RVR of 7/7/08 for Mutual Combat.
	NA	NA	NA	NA	7/8/08	Mutual Combat	no	36	2	6	13	NA	NA	NA	NA	NA	NA	NA	0	0
W77575	10	29	2/6/09	0	9/21/08	Att Batt Staff	no	20	1	38	0	NA	NA	NA	0	1	NA	NA	113	Rcvd addtl RVRs of 10/6/08 and 10/21/08 while in ASU. SHU term approved by CSR on 1/8/09 w MERD of 2/6/09.
	NA	NA	NA	NA	10/21/08	Destruct Prop	NA	8	1	4	16	NA	NA	NA	NA	NA	NA	NA	0	0
	NA	NA	NA	NA	10/6/08	Narcotics	unk	5	6	4	29	NA	NA	NA	NA	NA	NA	NA	0	0
X24748	4	90	5/8/09	0	10/6/08	Batt l/m Weapon	no	4	34	4	23	NA	NA	NA	NA	NA	NA	NA	107	Endorsed 1/8/09 VSPW SHU. ISU info
W95572	7	29	3/1/09	0	10/15/08	Batt l/m Weapon	no	9	14	6	34	NA	NA	NA	NA	NA	NA	NA	89	Not referred to DA. End VSPW SHU 1/8/09 with a MERD of 3/1/09
	NA	NA	NA	NA	12/3/08	Disobey Orders	no	10	2	2	7	NA	NA	NA	NA	NA	NA	NA	0	0
X22476	1	6	5/4/09	0	10/29/08	Weapon	unk	not heard	NA	NA	NA	NA	NA	NA	22	0	NA	pending	75	RVR not heard. No indication as to whether inmate postponed RVR in file
W97393	7	15	2/2/09	0	7/30/08	Batt on Staff	yes	25	4	5	see commen	NA	NA	NA	63	0	NA	pending	166	SMITH Postponement rescinded for RVR of 7/30/08 on 8/13/08. l/m recvd multiple RVRs while in ASU. Pending RVRs from prior term also noted. No ICC review since 8/6/08
	NA	NA	NA	NA	7/31/08	Resist Staff	no	24	4	0	see commen	NA	NA	NA	NA	NA	NA	NA	0	0
	NA	NA	NA	NA	8/19/08	Mutual Combat	no	7	2	6	see commen	NA	NA	NA	NA	NA	NA	NA	0	0
	NA	NA	NA	NA	11/3/08	Batt l/m	no	18	4	13	see commen	NA	NA	NA	NA	NA	NA	NA	0	Not referred to DA
X08099	17	26	5/4/09	0	10/29/08	Batt l/m SBI	unk	not heard	NA	NA	NA	NA	NA	NA	51	0	NA	pending	75	RVR not heard. No indication in file as to whether postponed. Rcvd additional RVR of 11/15/08 Battery on Staff.
	NA	NA	NA	NA	11/15/08	Batt on Staff	unk	not heard	NA	NA	NA	NA	NA	NA	NA	0	NA	NA	0	RVR not heard. RVR referred per CDC 128B of 12/19/08.
W90986	1	8	1/13/10	0	7/13/08	Batt l/m SBI	yes	120	0	0	9	NA	NA	NA	95	NA	NA	NA	183	SMITH 128B of 10/16/08--"did not meet criteria for DA referral". SHU term approved--with MERD of 1/13/2010. Release date of 1/28/09 noted.
W27148	9	48	1/29/09	0	11/3/08	Threat Staff	no	21	2	6	28	NA	NA	NA	NA	NA	NA	NA	70	RVR of 11/3/08 not referred to DA. Received addtl pending RVRs while in ASU.
	NA	NA	NA	NA	12/17/08	Under Infl	NA	not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	RVR not heard
	NA	NA	NA	NA	12/19/08	Under Infl	NA	not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	RVR not heard.
X27044	6	15	2/2/09	0	7/4/08	Bat Staff	unk	not heard	NA	NA	NA	NA	NA	NA	89	0	NA	pending	165	PENA. EOP case originated from CCWF. Received VSPW-SHU and received multiple RVRs while in SHU. Expired MERD of 8/7/08 noted. RVR of 7/4/08 not heard. Referred to DA

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPT Desk To BPH for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments	
	NA	NA	NA	NA	7/1/08	Batt Staff	unk	not heard	NA	NA	NA	NA	NA	NA	92	0	NA	pending		0	RVR not heard. Referred to DA
	NA	NA	NA	NA	8/12/08	Refuse Double cell	NA	10	3	2	NA	NA	NA	NA	NA	NA	NA	NA		0	No ICC review since 8/6/08.
	NA	NA	NA	NA	8/25/08	Refuse Double cell	NA	13	24	1	NA	NA	NA	NA	NA	NA	NA	NA		0	
	NA	NA	NA	NA	9/26/08	Mutual Combat	NA	34	6	5	NA	NA	NA	NA	NA	NA	NA	NA		0	
	NA	NA	NA	NA	1/10/09	Delay P/O	NA	not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		0	Not heard
X19699																					Postponed but rescinded 10/8/08. Rcvd attnl RVR of 11/3/08 in ASU. ICC of 11/19/08 referred for SHU audit per CDC 262--no 128G
	10	37	4/6/09	0	9/28/08	Batt l/m SBI	yes	14	2	1	35	NA	NA	NA	99	0	NA	NA		107	
	NA	NA	NA	NA	11/3/08	Fighting	NA	11	3	1	1	NA	NA	NA	NA	NA	NA	NA		0	
X24550	2	36	12/23/08	21	9/22/08	Battery on Staff	yes	not heard	NA	NA	NA	NA	NA	NA	113	0	NA	pending		113	RVR not heard
W81645	9	36	3/2/09	0	8/25/08	Weapon	yes	not heard	NA	NA	NA	NA	NA	NA	41	0	NA	pending		141	RVR not heard
W89305	8	64	11/22/09	0	10/7/08	Batt Staff	no		3	1	42	NA	NA	NA	73	0	NA	pending		98	SHU term approved via CSR of 12/18/08 with MERD of 11/22/09. SHU Transfer deferred due to problems with an RVR which occurred prior to current ASU placement
																					RVR not heard. ICC of 12/17/08 referred to CSR for 120 day after per 262--no 128G. To be seen by CSR on approx 1/15/09. Recvd addtnl RVR o f10/16/08 while in ASU.
W50832	10	29	12/20/08	24	10/23/08	Drug Distr	yes	not heard	NA	NA	NA	NA	NA	NA	46	0	NA	pending		93	
	NA	NA	NA	NA	10/16/08	Refuse cell	NA	8	3	2	49	NA	NA	NA	NA	NA	NA	NA		0	
X14002	10	36	5/4/09	0	10/26/08	Batt l/m SBI	yes	43	1	1	14	NA	NA	NA	NA	NA	NA	unk		79	Postponement rescinded on 11/25/08. 12/24/08 per 262--ICC referred case for a 12 mo SHU term.
x31464	10	36	5/4/09	0	10/26/08	Batt l/m SBI	yes	not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	unk		79	RVR not heard.
X31058	9	36	5/4/09	0	10/27/08	Batt l/m Weapon	unk	not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	unk		78	RVR not heard.
W99115	4	23	3/3/09	0	8/23/08	Batt l/m	yes	not heard	NA	NA	NA	2	0	11	41	0	NA	pending		143	RVR not heard.
X31280	6	43	12/16/08	28	9/11/08	Batt l/m	no	2	2	1	1	NA	NA	NA	NA	NA	NA	NA		124	Per 262 ICC of 12/10/08 referred case for multiple SHU audits--no 128G. Recvd additional RVR of 11/29/08 while in ASU
	NA	NA	NA	NA	11/29/08	Batt l/m	no	8	1	0	2	NA	NA	NA	NA	NA	NA	NA		0	
W80440	9	36	3/2/09	0	8/25/08	Weapon	yes	not heard	NA	NA	NA	NA	NA	NA	39	0	NA	pending		141	RVR not heard.
W80784	5	22	12/30/08	14	6/27/08	Weapon	yes	120	5	5	43	0	5	12	96	0	NA	pending		200	Postponed but rescinded 9/30/08. Rcvd additional RVRs in ASU. ICC of 12/17/08 referred case for a 12 mo SHU term per 262 entry--no 128G.
	NA	NA	NA	NA	8/19/08	Mutual Combat	NA	11	3	2	27	NA	NA	NA	NA	NA	NA	NA		0	
	NA	NA	NA	NA	8/22/08	Batt Staff	yes	73	2	2	40	NA	NA	NA	NA	NA	NA	NA		0	Postponed but rescinded 10/29/08
	NA	NA	NA	NA	9/28/08	Delay P/O	NA	13	4	2	61	NA	NA	NA	NA	NA	NA	NA		0	

DISCIPLINARY

[illegible]

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPH Desk To BPT for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
W56119	8	28	4/21/09	0	5/13/08	Weapon	yes	143	12	2	19	NA	NA	NA	15	0	173	accepted	246	SHU term approved 12/11/08 with MERD of 4/21/09
X25116	6	not seen	NA	see comment	11/16/08	Riot	NA	20	2	0	37	NA	NA	NA	NA	NA	NA	NA	69	COX Per 262 ICC of 1/14/09 referred case for 4 month SHU. Never seen by CSR. Release to GP via ICC of 1/14/09 per 262.
X20727	7	29	10/24/08	82	9/3/08	Threat Staff	no	22	0	1	110	NA	NA	NA	NA	NA	NA	NA	133	CRUZ Per 262 ICC of 1/14/09 ICC referred case for SHU audit and released l/m to GP based on expired MERD. Of note: CSR of 10/9/08 noted adjudicated RVR of 9/3/08 in the file and granted a 15 day ASU ext to refer case for SHU audit. l/m did not depart VSPW/ and there does not appear basis for the lengthy delay in presenting this case for audit.
W98127	6	16	1/16/09	0	7/16/08	Threat Staff	no	28	5	2	14	NA	NA	NA	NA	NA	NA	NA	182	Rcvd addtnl RVRs of 7/17/08 and 7/21/08 while in ASU. 10/9/08 CSR apprvd SHU term with a MERD of 1/16/09.

SAFETY

[illegible]

SAFETY

[illegible]

SAFETY

[illegible]

GANG

[illegible]

GANG

[illegible]

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

CASE RECORDS

VALLEY STATE PRISON FOR WOMEN
JANUARY 5 THROUGH JANUARY 16, 2009



PRELIMINARY

CONDUCTED BY

CASE RECORDS ADMIN

VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER COMPLIANCE REVIEW

Correctional Case Records Services lead a three member team comprised of Kathy Moore, Correctional Case Records Administrator, Karen Huffman, Correctional Case Records Manager, Central California Women's Facility-Reception Center and Dorothy Johnson, Correctional Case Records Manager, Substance Abuse Treatment Facility to conduct a compliance review January 12, 2009, through January 16, 2009, of specific areas within the Valley State Prison For Women-Reception Center (VSP-RC) Records Office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and staff assisted with providing information to the review team when requested.

The three primary areas reviewed were:

1. Central File Request Process
2. Holds, Warrants and Detainers (HWD)
3. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

CENTRAL FILE REQUEST PROCESS

Reference: DOM Section 72020.4.6

"The CCRM shall communicate with the appropriate regional CCRM, using the telephone, FAX, or OBIS, advising them of the receipt of the parole violator(s) and shall request that the case files be forwarded immediately.

- *Case files on parole violators (PVRTC or PVWNT) shall be requested daily.*
- *Parole regions shall forward requested files to the institution immediately."*

Reference: Instructional Memorandum (CR 97/03)

"Reception Center Managers are directed to implement a tracking system which documents that the initial request was received by the region and that follow-up requests are being made no more than five working days after the initial request."

Reference: Instructional Memorandum (CR 01/17)

"...The Reception Center Correctional Case Records Manager (CCRM) shall request the Central File for PVRTC (Parole Violator Returned To Custody) and PVWNT (Parole Violator With A New Term) daily. Case Records North and Case Records South shall send the Central File to the institution within three working days. When the Central File cannot be located, the CCRM or designee shall be contacted."

**VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER
COMPLIANCE REVIEW**

“...If the Central File is not located after 30 calendar days from the original request, then Case Records North or Case Records South shall reconstruct the Central File....”

An overdue file request list for Case Records South and Case Records North was requested, however there were none to report.

General Findings:

Processes for requesting and tracking of Central Files from the Regions Records Office are in Compliance. However, the manual tracking log that reflects when inmates are received, the date the Central File was requested and received are not always being updated appropriately. The following cases are examples of where information is missing on the log.

X16493 Ortiz, Iris. The Central File was requested on 12-12-08, no 2nd request indicated and the log still reflects the Central File has not been received, however it had been.

X02900 Callahan, and W96430 Morgan. These two cases are reflected on the log as the inmates arriving on 12-16-08, however there is no indication on the log that the Central Files were requested or received. In researching this issue it was discovered that the Central Files were never requested because one inmate was a COP and the other was an ICDTP case. It was suggested to staff to indicate this information on the log.

Also, it is unclear on how VSP-RC tracks the Central Files to ensure they are forwarded to the Region Records Offices in the appropriate time frame (10 days) after the inmate has paroled. There were two cases found where the Central Files are still at the VSP-RC, one for 27 days and another for 32 days.

W77837 St. Amour, Debbie
W80900 Hawkins, Rosalee

Recommendations:

- Utilize the Automated Release Date Tracking System (ARDTs) for tracking and requesting the Central Files.
- Implement a way to ensure Central Files of inmates that have paroled are being forwarded to the appropriate Region Records Office in accordance with policy and procedures.

**VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER
COMPLIANCE REVIEW**

HOLDS, WARRANTS AND DETAINERS (HWD)

Reference: DOM Section 72020.4

“Reception Centers or receiving institutions shall prepare required departmental forms on inmates received with new commitments.

“A full Criminal Identification and Investigation rap sheet shall be run and reviewed as part of the initial processing of reception center inmates.”

Reference: DOM Section 72040.5.2

“In the Reception Centers, actual detainers that are included with the ‘prison package’ or arrive before the counselor has begun processing the case shall be reviewed by the HWD coordinator who will sign off the HWD log in the ‘Initial Disposition’ section as an unprocessed case. These detainers shall not be referred to the designated staff member unless there is an apparent security risk such as a potential life term or extremely long determinate sentence.”

Reference: DOM Section 72040.5.2.1

“Reception Centers shall not be required to initiate or follow-up potential HWD requests except for those inmates who are permanently housed at the Reception Center or pending imminent release. It shall be the responsibility of the receiving facility to review the inmate’s central file for any CDC Form 850s initiated at the Reception Center and to complete the initial inquiry and any required follow-up as previously specified.”

“If a move to work furlough, parole, or TCL is approved, the HWD coordinator shall query the OBIS HWD file within 24 hours of the actual move...If a ‘hold’ is received on the same day or subsequent to the approval of a move, the HWD coordinator shall immediately notify the C&PR or the Assistant Regional Administrator for review of the move approval and action in accordance with aforementioned procedures for processing detainers.”

Reference: DOM Section 72040.5.1 & 72040.5.3

“The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log.”

“The HWD Coordinator’s initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit.”

VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER COMPLIANCE REVIEW

“If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts, and immediately contacting the designated staff person responsible for evaluating the potential detainer...”

Desk Procedures for the HWD clerical staff were reviewed. Even though the desk procedures are available and cover the HWD processes, they have not been updated, in some areas, since 1997.

There were 21 Central Files reviewed for this portion of the Compliance Review. Listed below are the discrepancies found in the processing of the Hold, Warrant and Detainers (HWD).

General Findings:

- In 20 of the cases reviewed, it appears the 4 hours for completing the receipt of a Detainer is not in compliance with Departmental Policies and Regulations. The CDC 850's are not being documented with the times for each part of the detainer process in addition to the CDC 112's not being posted accurately in all cases.
- In the 20 cases reviewed the CDC 850 is not consistently being properly filled out to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.
- In one case reviewed there was hold information in ARDTS, however there was no indication in the Central File or in OBIS that the inmate had a hold.
- In 11 cases reviewed it appears the inmates were not afforded the opportunity to request disposition via the CDC-661.
- The cases which have had the CDC-661's forwarded to the inmates, the CDC-661s are being completed by the HWD Clerical Staff and are not being reviewed by the Case Records Analyst (CCRA), that's designated as the HWD Coordinator. This in violation of DOM Section 72040.5 and 72040.5.3.
- CDC-850s are not being prepared consistently for potential holds identified during the Intake Audit.
- During the parole audit staff is not consistently following through the required HWD process to clear potential holds that were identified during the intake audit.
- During the review it was discovered that staff are not utilizing the most current version of the CDCR 801 as directed in Informational Memorandum CR 07/08.
- During the review of the desk procedures as well as talking with staff it was discovered the KCHD is not being queried for any holds prior to the inmate's release to parole.

VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER COMPLIANCE REVIEW

- During the 10-Day audit the Case Records Analyst are removing the HWD information from OBIS and ARDTS. This procedure is not in compliance with DOM Section 72040.9.

Recommendations:

- Review and update HWD Desk Procedures for the clerical staff to include time frames for completing each step in the process.
- Procedures for the Correctional Case Records Analyst must be located and updated as necessary to include detailed instructions for processing HWD.
- On the job training should be provided and documented for the Correctional Case Records Analyst for their responsibilities in the HWD process.
- OBIS HWD “KCHD” screen should be queried within 24 hours of release to work furlough, TCL or parole to verify there are no new holds for the inmate. This will help to prevent an erroneous release of an inmate with an active hold.
- Share Instructional Memorandums with all staff to ensure compliance with Departmental Policies.
- Provide training to appropriate staff to ensure the CDC 850 is being properly filled out to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.

WARDEN’S CHECKOUT ORDER (CDC 161)

Reference: DOM Section 74070.3

“...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday.”

“Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden’s Checkout Order, and arrange distribution as required by institution operations.”

Reference: DOM Section 74070.21

“The following data shall be typed on the CDC Form 161:

- *Date of Release*
- *Type of Release*
- *CDC number*
- *Commitment name*
- *Controlling Discharge Date*
- *Name of parole unit and county of residence*
- *Parole Region*

**VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER
COMPLIANCE REVIEW**

- *Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.*

“The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS”

Reference: Instructional Memorandum (CR 01/14)

“...The CDC Form 161, Warden’s Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement...”

Reference: Instructional Memorandum (CR 92/17)

“...the Warden’s Checkout Order must include a notation above the Case Records staff’s signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable.”

Reference: Penal Code Section 3060.7 Interim High Control Parolee Release Procedures as of December 1995.

“...the Offender Based Information System data entry shall reflect under comments that a HC inmate was “Released pursuant to PC Section 3060.7”

Reference: PC 3060.7 RELEASE HANDBOOK, Classification Services Unit – Institutions Division, February 2002.

“Parolees not subject to PC 3060.7 Release Procedures...12) A parolee in custody pending a revocation hearing who is designated as HC, EOP, HRSO, or Second Striker parole supervision level and who is continued on parole by the Board of Prison Terms (BPT) during a revocation hearing. Non-revoked parolees are not considered inmates. However, the C&PR/CC III-RC shall immediately alert the Unit Supervisor of the imminent release of the inmate.”

Reference: DOM 75010.14.1

“When revocation of parole extends the period of parole, the recomputed PRRD (if applicable), RRD, PCDD (if applicable), CDD and DRD shall be posted to the first page of the BPT Form 1103; or BPT Form 1104, top right corner, prior to distribution.”

Reference: DOM 75010.14.2

“The original of all board reports and BPT decisions forms shall be filed in the C-file.

The below listed forms shall be distributed by case records staff as follows ...

- *Parole Agent...”*

VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER COMPLIANCE REVIEW

Reference: Instructional Memorandum Dated May 9, 1989, Notification of Release Date and Residence Plan –From Institution to Parole Unit –CDC 1121, signed by R.H. Denninger, Deputy Director, Institutions Division and Ed Veit, Deputy Director, Parole and Community Services Division

“...The parole agent is notified by telephone if the release date change occurs ten days prior to release. Under no circumstances should the regional Records Office be given the responsibility to notify the parole unit of the release date, except for re-entry inmates and parole violators confined Return-to-Custody facilities....” The above reference was modified to include notification via fax or telephone.

In reviewing the early/late releases, there were none to report.

Central files were reviewed for inmates/parolees who were released from VSP-RC for the preceding week of the review. Significant issues surrounding individual cases will be addressed with specific facts. There were 44 cases reviewed and the overall findings are as follows:

General Findings:

- 44 of the CDCR Form 161, Warden's Checkout Order did not reflect the time of release pursuant to policy and procedures (DOM Section 74070.21).
- The Warden's Checkout Orders are to include a check in the boxes for the notices pursuant to PC 3058.6, PC 3058.8, etc., or N/A if not applicable. This procedure is not being followed.
- Of the 44 cases reviewed, 1 case had the release date on the CDC 161 reflected as a PPRD and should have been reflected a PRRD.
- Of the 44 cases reviewed there was 1 case with a typographical error on the delivery instructions.
- Of the 44 cases reviewed there were 2 cases where the entry into OBIS was not accurate and did not reflect what was recorded on the CDC 161.
- Of the 44 cases reviewed there were 2 cases which reflected two different release types (RRD & CTS) on the CDC 161.
- Of the 44 cases reviewed there was one case that the PC 3058.6 notice box was not checked, and the offense was a violent offense. Also there was no indication in the Central File that the Notification to Law Enforcement (CDC-863) were sent out.
- Of the 44 cases reviewed there were two cases where a CDC 161 had been prepared with the CRA name for signature and then subsequently the CRA who would be signing off the CDC 161 changed. Both of the CDC 161's were found to be in the file. The CDC 161 that had been changed should have been destroyed.

**VALLEY STATE PRISON FOR WOMEN – RECEPTION CENTER
COMPLIANCE REVIEW**

Recommendations:

- The Notices Sent Pursuant to PC 3058.6, PC 3058.8, etc., on the CDC Form 161 Warden's Checkout Order need to include N/A, not applicable for those that do not apply.
- Reviewing the information on the CDC 161 Warden's Checkout Order for accuracy prior to sign-off.

STAFF VACANCIES

The vacancies are reported as follows:

One Office Technician (CRT) – Vacant since 1/08. This is a position that was given per Valdivia and has not been filled.

One Supervising Case Records Technician – The person in this position demoted to a Case Records Technician position.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

RISK
MANAGEMENT
PROGRAMS

VALLEY STATE PRISON FOR WOMEN
JANUARY 5 THROUGH JANUARY 16, 2009

The seal of the California Department of Corrections and Rehabilitation is a circular emblem. It features a green outer ring with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom, separated by two gold stars. The center of the seal depicts a golden scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

DESIGN STANDARDS AND REVIEW BRANCH

**OFFICE OF RISK MANAGEMENT (ORM)
JANUARY 2009 AUDIT**

VALLEY STATE PRISON FOR WOMEN

EXECUTIVE SUMMARY

From January 12 through January 16, 2009, the Office of Risk Management (ORM) conducted an audit of the Worker's Compensation Program, Occupational Health and Safety Operations, Hazardous Materials and Fire, Life, Safety Systems Institution-wide including a specific review of the Administrative Segregation Unit. The purpose of the audit/inspection was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. Auditors for this review included Fire Chief, Steve Mahoney and Staff Services Manager I, Stephanie Fields.

This was the first audit that the Office of Risk Management has conducted at Valley State Prison for Women. Findings from the audit were presented at the Exit Conference on January 16, 2009. The Office of Risk Management does not currently use a standard scoring system, therefore our audit findings do not reflect an overall score for the institution. There were no findings in the areas of Occupational Health and Safety/Injury and Illness & Injury Prevention Program.

Elements Audited Related to Workers' Compensation

- Workers' Compensation Program
- Early Intervention Program
- Return-to-Work Program
- CAL/OSHA Log 300 Compliance
- Inmate Workers' Compensation Program

Elements Audited Related to Health and Safety

- Illness & Injury Prevention Program
- HCP (Hearing Conservation Prog)
- RPP (Respiratory Protection Prog)
- BBP (Blood Borne Pathogens Prog)
- BST (Basic Safety Training)
- HIP (Heat Illness Program)
- CSP (Confined Space Program)
- MWMAP (Cal Waste Management Act Program)
- ADAG (American with Disability Act Accessibility Guidelines Emergency Eye Wash Station)
- HIPAA (Health Insurance Portability & Accountability Act)
- CRFC (CA Retail Food Code)
- HCR (Hazardous Communication Regulation)

Elements Audited Related to Fire, Life, Safety Systems

- Training
- Equipment
- Fire Inspections
- Fire Suppression Equipment
- Hazardous Materials
- Response/Mutual Aid

Areas Inspected at VSPW

- Hazardous Materials Storage Facility (VSPW)
- Administration Building Riser (VSPW)
- Firehouse (CCWF)
- Administrative Segregation Unit (VSPW)
- Plant Operations (VSPW)
- Administration Building (VSPW)

Below are the audit findings, categorized under the following topics:

Category	Number of Findings
Workers' Compensation Inmate Workers' Compensation	1
Workers' Compensation – Program Management	1
Fire, Life, Safety Systems – Equipment	1
Fire, Life, Safety Systems – Fire Suppression Equipment	1
Fire, Life, Safety Systems – Haz Mat	1
TOTAL	5

This executive summary provides the category, a brief description of the finding, criteria, and recommended corrective action.

Staff for the Workers' Compensation and Return-to-Work Programs are directly supervised by the Associate Warden, Business Services Division. Staff provided all of the requested documentation and were available to answer all of the questions presented in the audit tool.

1. WORKERS' COMPENSATION – Workers' Compensation Program

FINDING 1. CAL/OSHA Log 300 for inmates has not been posted for the last 3 years.

Criteria: Title 8, CCR §14305

Risk/Impact: The Institution risks being cited by Cal/OSHA for being out of compliance with Title 8.

Recommendation: Post CAL/OSHA Log 300 for inmates as required by California regulations.

2. WORKERS' COMPENSATION – Program Management

FINDING 1. There is no Institution Workers' Compensation Analyst (IWCA) position (SSA/AGPA) allocated to the VSPW Workers' Compensation Program. The Program is currently staffed with only two (2) positions: An Associate Governmental Program Analyst (AGPA) that serves as the Return-to-Work Coordinator (RTWC), and an Office Assistant (OA) that assists the RTWC with the processing of return-to-work forms, workers' compensation claims for employees and handles all inmate corksers' compensation claims.

Criteria: While there is no mandate that the Institution have an IWCA on staff, positions were allocated to many Institutions in 2005 to "better distribute workers' compensation caseloads and facilitate more effective case management."

Risk/Impact: Currently, the workload carried by the RTWC and the OA is being maintained adequately, however, the Institution's caseload could sustain two (2) full-time analysts to cover the areas of Workers' Compensation and Return-to-Work in addition to the support provided by the Office Assistant. With the shortage of a second analyst, there are some essential job duties that are not performed when the RTWC is absent.

Recommendation: It is recommended by the Office of Risk Management that the Institution secure funding and position authority in order to hire an additional AGPA to serve as an Institution Workers' Compensation Analyst (IWCA) in order to better distribute workers' compensation caseload from the RTW caseload. This recommendation is intended only to supplement and expand current workers' compensation activity.

4. FIRE, LIFE, SAFETY SYSTEMS – Equipment

FINDING 1. Pump testing on fire engines are out-of-date.

Criteria: NFPA 1901

Risk/Impact: Equipment failure resulting in loss of GPM could result in loss of life or property during an emergency incident.

Recommendation: Secure funding for annual pump testing to be completed.

4. FIRE, LIFE, SAFETY SYSTEMS – Fire Suppression Equipment

FINDING 1. Sprinkler system inspections and testing are out-of-date in the Administration building. Gauges are also out-of -service.

Criteria: DOM §52090.7.4

Risk/Impact: System failure during an emergency could cause extensive property damage and/or loss of life.

Recommendation: Secure funding to obtain a licensed contractor to initiate repairs and ensure annual testing and inspections are completed in a timely manner that meets DOM standards.

5. HAZARDOUS MATERIALS

This Institution does not have an Associate HazMat Specialist (AHMS) to oversee an appropriate HazMat program which includes approving receipt of hazardous materials into the Institution, overseeing satellite accumulation points, and providing proper training on the use and compatibility of hazardous materials, as well as other significant duties related to the management of hazardous materials. An AHMS is also required on-site to oversee the operations of a Hazardous Waste Storage Facility.

FINDING 1. The Institution does not have a certified Hazardous Waste Storage Facility.

Criteria: Title 8 §5192 and §5194

Risk/Impact: Failure to store hazardous waste appropriately will result in substantial fines levied against the Institution from agencies such as Department of Toxic Substance Control, County Environmental Health and State and Federal Environmental Protection Agencies. There would be substantial clean up costs in addition to the fines.

The current *claimed storage area* is located on bare dirt and hazardous material containers do not have secondary containment which produces a high risk of contaminating the surrounding soil.

Items are also not inventoried as well as labels being out-of-date or unreadable. Due to this lack of identification of the materials stored, there is a risk of the containers leaking and therefore incompatible materials have the potential for creating toxic fumes or explosive gasses.

Unaccounted for used containers located in an unsecured area outside the *claimed storage facility* have the potential for being re-used to store incompatible products which could also produce toxic fumes or explosive gasses.

Recommendation: Secure funding to construct a Hazardous Waste Storage Facility that meets all State and Federal regulations such as the facility located at CCWF. It is also recommended that the Institution secure funding and hire an AHMS in order to bring the Institution into compliance with the DOM and Title 8 requirements.

The Office of Risk Management appreciates the opportunity to participate in the audit at Valley State Prison for Women and would like to thank Chief Blankinship and his staff as well as Associate Warden Callahan, Cathy Etchebehere and the staff of the Business Services Office for their assistance and cooperation. We are pleased to be available to assist in any way we can. Thank you.